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Burgh of Greenock

ANNUAL REPORT

on the

HEALTH OF THE BURGH

FOR THE YEAR 1952

BY

Gordon S. Carrick, M.B., Ch.B., D.P.H., D.I.H.,
Medical Officer of Health

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PERSONNEL
HEALTH DEPARTMENT

Medical Officer of Health
ERIC H. WEIR DUNCAN, M.B., Ch.B., D.P.H.

Depute Medical Officer of Health
GORDON S. CARRICK, M.B., Ch.B., D.P.H., D.I.H.

Assistant Medical Officers of Health
MINNIE ATKIN, M.B., B.S., D.P.H.
*MARY B. ANDERSON, M.B., Ch.B., D.P.H.
JANET F. GRAHAM, M.A., M.B., Ch.B., D.C.H., D.P.H.
* Half-time on School Health Service.

Superintendent Nursing Officer
MARY I. CRAWFORD, S.R.N., C.M.B., H.V., Q.I.D.N.

Health Visitors

ANNIE LONIE
MARY WATSON
FLORA McISAAC
MARY R. McFARLANE
HARRIET MacPHERSON
MARY McLEOD
Mrs ISABEL CLARK
JEAN DEVINE
MARGARET A. MAITLAND (Transferred to School Health Service August, 1952)
FLORA DUNCAN
HELEN C. W. EAGLESHAM
HANNAH LYALL (Commenced duty 5-5-52, resigned 31-10-52)
Mrs I. C. HUGHES (commenced duty 1-9-52)

Infectious Diseases Nurse—ISABEL CRUMLISH*

* Half-time as Mental Health Visitor.

In addition two nurses of the Greenock District Nursing Association act as whole-time Health Visitors under the Maternity and Child Welfare Scheme.

Office Staff

John McCRONE, Epidemic Officer (died 28-7-52).
ROBERT FORREST, Epidemic Officer (commenced duty 1-10-52).

ELSIE C. GREENHAM
MARGARET C. MacELWEE
MARY A. CORMACK
PHYLLIS E. CHANDLER
MATILDA BAUMGART
JANET D. MUIR
MARGARET WALMSLEY
MARGARET A. NELSON
EVELYN FINDLAY

Corporation Midwives

Mrs ISABELLA SWAN
Mrs HELEN HAMILTON
JEAN PENNIE (Mrs Gilmour)
RACHEL CAMERON
MARION K. CAMERON
Mrs ALICE WEIR
DOROTHY McFARLANE
MARGARET McBAIN
MARY THOMSON
Mrs MARY GREEN
Mrs MARGARET COPLAND (Commenced duty 1-6-52)

In addition to the above, Greenock District Nursing Association provided two full-time midwives.

PERSONNEL—Continued

Disinfecting Station

ARCHIBALD COMRIE, District Disinfecting Officer.
PETER MALLON, Station Disinfecting Officer.

Reception House

Mrs ROBERTSON, Caretaker.

Day Nursery

Mrs J. TELFER, S.R.N., Matron.

Attendants in Charge of Toddlers' Playgrounds

ELEANOR MILLER. Mrs MUNN. Mrs ARMOUR.

SCHOOL HEALTH DEPARTMENT (4 Brymner Street)

Medical Officers

*MARY B. ANDERSON, M.B., Ch.B., D.P.H.
JANET F. GRAHAM, M.A., M.B., Ch.B., D.C.H., D.P.H.
* Half-time on Maternity and Child Welfare Service.

School Nurses

MARGARET C. FULTON (Retired 14-6-52)
MARY McA. BROCKIE
MARIE R. P. J. McCALLUM (Retired 1-10-52)
Mrs GARDNER (Commenced duty 27-10-52)
GERTRUDE McWILLIAM (Resigned 1-10-52)

Office and Clinic Staff

MARY M. RANKIN
MARGARET McKINNON
SUSAN DONALD

WELFARE DEPARTMENT

Welfare Officer

ARCHIBALD MUIR, P.L.D.

Assistant Welfare Officer

THOMAS SUTHERLAND.

Office Staff

MARTHA PHILIP (Resigned 28-2-52).
MARGARET DONALDSON (Commenced duty 18-2-52).

Caretaker and Removal Officer

PETER DUNN.

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To the DEPARTMENT OF HEALTH FOR SCOTLAND,
and the LOCAL AUTHORITY OF THE BURGH OF GREENOCK.

LADIES and GENTLEMEN,

I have the honour to submit the Annual Report of the Medical Officer of Health of the Burgh for the year 1952.

The statistics for the year show that the reduction in the infant mortality rate was maintained. This is the second year that the rate has been practically the same as for Scotland as a whole. For the years 1946 to 1950 the Infant Mortality rate for Greenock was about 25% higher than for Scotland. The tuberculosis death-rate has also fallen by 42% since 1951 although the notification of new cases has increased.

The Health Department lost through sudden death the valuable services of Mr McCrone, Epidemic Officer, who gave the Greenock Corporation over twenty-five years of faithul service.

The Secretary of State for Scotland has asked all Medical Officers of Health to review the services provided by Local Health Authorities under Part III of the National Health Service (Scotland) Act, 1947. The services so provided have been reviewed by me in this Annual Report, which covers the term of office of Dr Duncan, who resigned in 1953.

On behalf of Dr Duncan I wish to acknowledge the support given by the Corporation and all members of the staff during the year.

I am,
Ladies and Gentlemen,
Your obedient Servant,
G. S. CARRICK,
Medical Officer of Health.

STATISTICAL SUMMARY—1952

Population as estimated at middle of 1952,	77,048
Acreage of Burgh,	3,846
Density of Population per acre,	20.03
Birth Rate,	18.6
Illegitimate birth-rate per 100 births,	5.0
Marriage-rate (uncorrected),	8.3
Death-rate—all causes,	11.6
Death-rate—all tuberculosis,	0.43
Death-rate—tuberculosis of respiratory system,	0.36
Death-rate—non-respiratory,	0.07
Death-rate—principal epidemic diseases,	0.16
Infantile mortality rate,	36
Neo-natal death rate,	13
Stillbirth rate,	34
Maternal death-rate (Registrar General),	0.67

All rates given are corrected for transfers except where otherwise indicated.

PUBLIC HEALTH DISTRICTS

A—EAST DISTRICT—corresponds to municipal wards Nos. I and II—acreage 666.

B—EAST CENTRAL DISTRICT—corresponds to municipal wards Nos. III, IV, and V—acreage 846.

C—WEST CENTRAL DISTRICT—corresponds to municipal wards Nos. VI and VI—acreage 247.

D—WEST DISTRICT—corresponds to municipal wards Nos. VIII and IX—acreage 2,087.

Note—The Burgh boundary was enlarged in 1952 and all wards increased in acreage. The total Burgh increase was 101 acres.

Medical Officer's Report

For the Year 1952

VITAL STATISTICS

POPULATION.—The Registrar General's estimate of the population of the Burgh to the middle ef 1952 is 77,048 and this figure has been used as the basis of all statistical calculations except where otherwise indicated.

This estimated population shows an increase of 423 over last year's figure.

The natural increase is 541. This shows a decrease on last year's figure of 602 and is below the average for the last ten years, namely 662.

BIRTHS AND BIRTH-RATE.—The number of births registered during the year 1952 was 1,513. After correction it became 1,434 (730 males and 704 females) and the equivalent rate is 18.6. Last year's rate was 20.4 and the average for the last five years is 21.3.

The birth-rate for Scotland as a whole is 17.7.

Tables I-IV give further information on this subject.

INFANTILE MORTALITY, NEO-NATAL DEATHS AND STILL-BIRTHS.—The number of deaths of children under one year of age was 52, a decrease on last year's figure of 56 and below the average for the last ten years, namely 109. The corresponding infantile mortality rate is 36. Last year's figure was 36 and the last ten-yearly average is 66.

This is a repeat of last year's record low infantile mortality rate.

The rate for Scotland is 35.

Premature birth was responsible for 15.4 per cent of the total infant deaths, pneumonia for 23 per cent, birth injury and asphyxia at birth 7.7.

The neo-natal death-rate was 13 as against 32, the average for the last ten years. The rate for Scotland is 22.

Stillbirths numbered 50, giving a stillbirth rate of 34 as against 37, the average of the last ten years. The rate for Scotland is 26.

DEATHS and DEATH-RATE.—The total number of deaths registered in the Burgh was 986. When corrected for transfers this figure becomes 893 (462 males and 431 females). The corresponding death-rate is 11.6. This figure is lower than last year when it was 12.5 and below the average for the last five years, 12.3.

The death-rate for Scotland as a whole is 12.0.

The average age at death was approximately 66 years as against 59, the average figure for the last ten years.

CAUSES OF DEATH.—The following were the chief causes of death during 1952:—Heart disease, 288; cancer, 134; cerebral haemorrhage, 112; bronchitis, 41; violence, 41; tuberculosis, all forms, 33; pneumonia, 26: and congenital debility, 26.

Tables II and III give further information regarding causes of death, which may be conveniently grouped as follows:—

Principal Epidemic Diseases.—Whooping cough was responsible for one death, and measles for one death, while influenza caused 10 deaths. This total of 12 produced a death-rate of 0.16. These figures are lower than the corresponding figures for last year, namely 17 deaths and a rate of 0.22 but higher than the last quinquennial averages of 7 and 0.08.

The rate for Scotland is 0.08.

Tuberculous Diseases.—During the year the number of deaths from respiratory tuberculosis was 28 and the corresponding rate is 0.36 as against 48 deaths and a rate of 0.63 last year. The average rate for the last five years is 1.01. The rate for Scotland is 0.27.

Tuberculosis of other organs gave five deaths. The non-respiratory rate is 0.07, which is lower than last year's figure of 0.11 and lower than the last quinquennial average of 0.17. The figure for Scotland is 0.05.

Malignant Disease.—Cancer, in its various forms, was responsible for 134 deaths (63 males and 71 females) and the death-rate is 1.74. Last year's deaths amounted to 115 and the rate was 1.50, while the average number of deaths for the last ten years is 133 (69 males and 64 females) and the death-rate 1.74.

Diseases of Circulatory System.—The number of deaths from diseases of this system was 314 of which 288 were from diseases of heart and 26 from other causes. The heart disease rate is 3.74, which is slightly more than the corresponding figure for last year of 3.66 and more than the last five-yearly average of 3.40.

Diseases of Respiratory System.—These diseases produced 79 deaths during the year, which figure gives an equivalent death-rate of 1.03 as compared with last year's figure of 89 and 1.16. The average number for the last ten years is 105 and 1.38.

Pneumonia was responsible for 26 of the total respiratory deaths and the death-rate from this cause is 0.34. Last year the number was 30 and the death-rate 0.39, the average for the last five years being 0.50. Of these deaths 9 occurred in children under one year, none in children aged 1 to 5 years and 13 persons over sixty-five.

Bronchitis accounted for 41 deaths and of these 2 were in children under the age of one, while 30 were in persons over 65 years of age. The death-rate is .53 as against 0.63 last year and the previous quinquennial average 0.48.

Diseases of Nervous System and Sense Organs.—The deaths classified in this group numbered 120, of which 112 were due to cerebral haemorrhage, embolism or thrombosis. The death rate from this cause is 1.56 as against 1.84 last year, the last five yearly average being 1.45.

Diseases of Digestive System.—Deaths referable to this system number 34, of which 7 were due to diarrhoea and enteritis, and of these 4 occurred in children under one year of age, 9 were caused by gastric and duodenal ulcer, 6 by diseases of liver, 1 by appendicitis and 11 by other digestive conditions.

The number of deaths from diarrhoea and enteritis in children under one year of age was 3 in 1951 and the last quinquennial mean is 7.4.

Diseases of Genito-Urinary System.—The deaths from diseases of this system totalled 20 of which 6 were due to nephritis and 14 to other conditions.

Diseases of Pregnancy and Childbirth.—The Registrar General shows 1 death from this cause, attributed to a condition other than sepsis. The following table gives the maternal death-rates for period 1900 to 1952 and it will be seen that the 1952 figure shows a decrease over the previous two years:—

Period	Death-rate from Puerperal Sepsis	Death-rate from other Puerperal Causes	Maternal Death-rate
1900—1904	2.46	2.84	5.31
1905—1909	1.59	3.53	5.13
1910—1914	1.26	5.37	6.63
1915—1919	0.88	4.95	5.83
1920—1924	1.58	4.71	6.29
1925—1929	1.80	4.16	5.96
1930—1934	1.40	5.00	6.40
1935—1939	1.31	4.29	5.60
1940—1944	0.94	3.31	4.25
1945	1.29	0.64	1.93
1946	0.00	2.92	2.92
1947	0.51	0.00	0.51
1948	0.00	0.57	0.57
1949	0.00	0.58	0.58
1950	0.59	0.59	1.19
1951	0.00	1.87	1.87
1952	0.00	0.67	0.67

Note:—From 1940 onwards the figures in this table are calculated from the corrected number of births plus the corrected number of stillbirths.

The maternal death-rate for Scotland is 1.0.

Diseases of Early Infancy and Congenital Malformations.—These deaths numbered 19 and may be classified as follows:—

Premature birth, 7; Injury at birth, 2; Asphyxia at birth, 2; Debility, 2; Congenital Malformations, 4; Pneumonia, 2.

Last year's number was 32 and the average for the last five years is 45. Further information regarding children under one year of age will be found in the section Care of Mothers and Young Children.

Violent Deaths.—These numbered 41 of which 4 were apparently suicidal (3 males and 1 female) and 37 accidental (28 males and 9 females). The figure includes 9 road transport accidents (6 males and 3 females). The corresponding figures for the last year were 1 suicide (male) and 32 other violent deaths (21 males and 11 females) including 7 road accidents (6 males and 1 female). The average of the last ten years is 3 deaths from suicide and 40 from other violence.

INFECTIOUS DISEASE

During 1952 there were ascertained by this department 1,593 cases of infectious disease. This figure does not include tuberculosis, secondary pneumonia, venereal disease and scabies. The figures show a decrease over the previous year's total of 2,463 and is less than the previous quinquennial average of 2,612.

Further information regarding infectious disease will be found in Tables V to IX.

Notifiable Infectious Diseases

SCARLET FEVER.—Ninety-five cases were notified with highest incidence in months of September and November. The incidence rate for the year is 1.23. Last year there were 91 cases and the average for the last five years is 233. There were no deaths.

There was no marked epidemic prevalence at any time and the cases were in general of a mild type.

DIPTHERIA.—One case was confirmed during the year, giving an incidence rate over the whole poulation of .013 as compared with 8 cases and a rate of 0.10 last year. The case recovered.

Contacts.—When considered advisable, throat swabbing of contacts was carried out and one person was thus investigated with negative result.

Immunisation.—This is discussed under the heading "Vaccination and Immunisation."

Diptheria in immunised persons:—

The confirmed case had been immunised 4 years previously.

ENTERIC FEVER.—One case of true typhoid occurred and with treatment recovered.

PNEUMONIA.—A total of 197 cases was discovered, 43 of acute primary type, 6 of acute influenzal type and 148 cases presumably secondary to some other infections. The highest incidence occurred in the month of April.

Last year's figure was 155 and the average for the last five years 110. One hundred and thirty-five cases were removed to the Infectious Diseases Hospital and the number of deaths was 26.

POLIOMYELITIS.—Five cases were confirmed. Unfortunately no effective preventive measures against anterior poliomyelitis have as yet been evolved but it is to be hoped that in the reasonably near future a means of prevention will be discovered.

PUERPERAL FEVER AND PUERPERAL PYREXIA.—Two cases of puerperal fever and 12 of puerperal pyrexia were notified.

SMALLPOX.—No cases were notified. Information regarding vaccination is given under the heading "Vaccinnation and Immunisation."

MALARIA.—One case was notified. There was a previous history of malaria within the year, at Hong Kong.

CEREBRO-SPINAL MENINGITIS.—No cases of this disease were notified during the year.

DYSENTERY.—Thirty-four cases were recorded. Eighteen of these cases occurred in a minor epidemic among the patients in Gateside Hospital in the latter part of the year.

NON-NOTIFIABLE INFECTIOUS DISEASES.—By the co-operation of general practitioners, parents and others, intimations were received concerning the occurrence of certain other infectious diseases not compulsorily notifiable and these are discussed below.

The figures cannot be regarded as complete but they afford a reasonably good index of incidence in the Burgh.

MEASLES (INCLUDING GERMAN MEASLES).—The number of cases intimated during the year was 560, giving an incidence rate of 7.27. Last year's figure was 1,103 cases and the rate 14.39, while the last five-yearly average was 823.

The disease was most prevalent in the months of February, March and December. Twelve cases were removed to hospital. There was one death of a very young baby. Of the children under school age 307 were affected.

CHICKENPOX.—Three hundred and sixty-three cases were intimated, the incidence being highest in the months of February, March and December. The number last year was 702 and the last five-yearly average 594.

WHOOPING COUGH.—Intimation was received concerning 417 cases. Last year's figure was 157 and the last quinquennial mean 329. The incidence rate was 5.41. Seven patients were removed to hospital. The number of cases of children under five was two hundred and twenty. There was one death.

Prevention.—The figures for whooping cough immunisation are given under the heading "Vaccination and Immunisation."

MUMPS.—There were 34 cases intimated during the year. Last year cases numbered three hundred and six.

INFECTIVE HEPATITIS (Epidemic Catarrhal Jaundice).—Four cases occurred during the year and three were removed to hospital.

SCABIES.—Most of the cases of scabies discovered were referred by the School Medical Service.

The numbers dealt with during the year were as follows:—

	Men	Women	Children under 14 years of age
Number of persons treated, ...	3	—	5
Total attendances, ...	8	—	10

There has been no change in the procedure with regard to this disease. When a case is referred for treatment the affected household is visited and the family examined and treated, if necessary, wherever this is practicable.

VENEREAL DISEASES

The number of new cases of suspected venereal disease resident in the Burgh who attended local clinics during the year was as follows:—

Syphilis		Gonorrhoea		Chancroid		Other Venereal Conditions		Non-Venereal Conditions	
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
3	3	18	9	—	—	3	—	28	3

The total number of new cases dealt with at the clinics, including outside areas, was:—

6	7	52	9	2	—	4	—	67	3

The total number of cases dealt with at the clinics during the year (including those from outside areas) was as given below:—

39	25	64	22	2	—	4	—	73	5

Of the above figures the following discontinued attendance—(a) before completion of treatment; and (b) after completion of treatment, but before test of cure.

(a)	1	10	3	4	—	—	—	—	—	—
(b)	—	—	5	—	—	—	—	—	—	—

Relevant propaganda was continued during the year, posters being shown on hoardings and in public lavatories throughout the Burgh and the dock area.

VERMIN INFESTATION

During 1952, 22 persons (11 children, 3 women and 8 men) made 23 attendances at the cleansing station for treatment on account of infestation by head and body lice.

Twenty-one school children with 102 attendances attended a special clinic for the treatment of head infestation.

ADMINISTRATIVE ORGANISATION

The administration of the Public Health Department has changed little since the National Health Service (Scotland) Act, 1947. The Services transferred to the Health Department were, the Mental Health Services and Services under Part III of the National Assistance Act, 1948. One combined Health and Welfare Department administers these services.

The Medical Officer of Health is the principal medical officer of the Corporation and principal administrative officer of the Public Health Department and is responsible to the Corporatioon and to the Health Committee for the administration of all the health functions of the Corporation.

A Welfare Officer and Assistant have been appointed and work under the supervision of the Medical Officer of Health. The Children's Officer does not work directly under the Medical Officer of Health but is in the same building and co-operates with the staff of the Health Department.

All Health functions, including the Public Health and Sanitary Department and the Abattoir, are the responsibility of the Health Committee. A Welfare Committee and a Children's Committee have been appointed and the Medical Officer of Health attends the Welfare Committee as well as the Health Committee.

CO-ORDINATION AND CO-OPERATION WITH OTHER PARTS OF THE NATIONAL HEALTH SERVICE

Co-operation between representatives of the Local Health Authority, the Regional Hospital Board and the Executive Council, has taken place at executive level and no special co-ordinating committee has been formed since the introduction of the National Health Service (Scotland) Act. Although the Rankin Maternity Hospital was transferred to the Regional Hospital Board the Medical Officer of Health retains the responsibility for the booking of Greenock cases for hospital confinement. The Guide to the Local Health Services was printed shortly after the introduction of the National Health Service (Scotland Act, 1947, and any subsequent alterations in times of clinics have been given adequate publicity.

JOINT USE OF STAFF

There have been no part-time hospital appointments made for medical officers in the employ of the the Authority and it has not been found necessary to seek the assistance of the Executive Council in regard to the use of general practitioners in the Maternity and Child Welfare Clinics.

CARE OF MOTHERS AND YOUNG CHILDREN

Expectant and Nursing Mothers

The Local Health Authority, prior to the appointed day, provided three ante-natal clinics carrying out four sessions each week. Since 5th July, 1948, a further ante-natal clinic has been inaugurated, this being held once weekly in rented premises. Post-natal examinations are carried out at these clinics but few mothers avail thmeselves of this service as most domiciliary cases are examined post-natally by their family doctors and hospital patients return to the hospital for their post-natal examination. Blood tests are performed as a routine on every patient first attending the Local Health Authority Ante-natal clinics.

No organised lectures on mothercraft are given in the clinics, each expectant mother being advised individually by the health visitor and doctor. No arrangements exist for the attendance of consultants at the Local Authority Ante-natal clinics and the general practitioners and medical officers at the Local Authority Ante-natal clinics refer patients requiring specialist examination to the Rankin Maternity Hospital. Facilities for the X-ray examination of ante-natal cases are available at the Greenock Royal Infirmary.

A maternity outfit and supply of disinfectant are issued, free of charge, to all expectant mothers one month before the time of domiciliary confinement and in extremely necessitous cases layettes are supplied free of charge. One dental clinic is held fortnightly for dental examination and conservative treatment for expectant mothers and mothers of children up to one year of age.

ANTE-NATAL AND POST-NATAL CONSULTATIONS—

	Ante-natal	Post-natal
(i) Number of clinics at end of year provided by Local Health Authority, ...	4	4
(ii) Number of clinics at end of year provided by Voluntary Bodies, ...	—	—
(iii) Total number of women who attended,	547	270
(iv) Total number of attendances made by women during the year, ...	1,278	270

Ante-natal cases.—The number of first attendances was 457 and of subsequent attendances 821.

The following conditions were found:—

I. Existing before pregnancy.

(*a*) Anaemia and debility,	52
(*b*) Gynoecological conditions,	3
(*c*) Hypertension,	1
(*d*) Respiratory disease,	6
(*e*) Cardiac disease,	3
(*f*) Venereal disease,	1
(*g*) Tuberculosis,	1
(*h*) Epilepsy,	1

All the above mothers gave birth to live babies except two in group (*d*) who had abortions. Groups (c) and (*g*) were recommended for admission to the Rankin Memorial Hospital in addition to some in group (*a*).

In all 75 mothers who attended the ante-natal clinic were recommended for admission to the Rankin Memorial Hospital for medical and obstetric reasons.

II. Associated with pregnancy.

(*a*) Malpresentation,	8
(*b*) Toxaemia,	12
(*c*) Multiple pregnancy,	4

In group (*a*) 7 were multiparae. Versions were performed on six who had normal confinements and live babies. The seventh case was associated with placenta praevia and admitted to Rankin Memorial Hospital where Caesarian section was performed and a live baby delivered.

Of the cases in group (*b*) 9 were mild cases resulting in live births. Three were of sudden onset and severe and were treated by Caesarian section All three babies were premature and live born. All cases were delivered in the Rankin Memorial Hospital.

All cases in group (c) were confined in Rankin Memorial Hospital and resulted in live babies.

Rhesus Factor Examinations.—Number of examinations for the Rhesus factor in the year was 320, of which 55 or 17% were found to be Rh. negative. Antibodies were present in two cases in titres 1 in 16. Both patients were confined in Rankin Memorial Hospital and gave birth to live babies. Both were multiparae of parity 3 and 4 respectively.

Of the fifty-five mothers 25 were primiparae, 11 were para 2, 9 were para 3, 4 were para 4, 3 were para 5, 1 was para 6, 1 para 9 and 1 para 10.

None had had antibodies in previous confinements except for one patient, a para 3, who, in her second pregnancy, had had antibodies present and was delivered of twins, one of which was live born and normal and the second stillborn due to erythroblastosis foetalis. She was confined in hospital for the third pregnancy in view of her history but had no antibodies and gave birth to a normal live infant. One, a para 2, had no antibodies but the baby required blood transfusion at 3 weeks for haemolytic anaemia.

All the pregnancies terminated in live births except for two miscarriages and one stillbirth due to concealed accidental Haemorrhage.

MATERNAL MORTALITY:—

Number of deaths resulting from pregnancy or confinement ...	1
Number of deaths resulting from Puerperal Sepsis	—
Maternal death-rate	0.67

CHILD WELFARE—

Three Child Welfare Clinics, providing four sessions each week, were in operation in the Burgh prior to the 5th July, 1948, and since that date one additional Child Welfare Clinic has been opened and six sessions in all per week are now provided. Generel advice is given on child welfare and immunisation against whooping cough and diptheria and vaccination against smallpox are carried out at these clinics.

The opinion of a specialist can be obtained on general surgical cases, eye and ear cases, by reference to the appropriate hospital in Greenock. Orthopaedic cases are seen by the Consultant Specialist appointed by the Renfrewshire Education Authority and can then be referred for physiotherapy as required. Children with skin defects are also seen by a Consultant Specialist appointed by the Renfrewshire Education Authority. Beds are available in the Greenock Royal Infirmary for children requiring hospital treatment but no Paediatrician has been appointed locally.

One dental clinic is held fortnightly for dental examination and conservative treatment of children under five years of age. Artificial sunlight clinics are in operation twice weekly at each of two Child Welfare Clinics.

The uptake of vitamin food supplements has been again unsatisfactory. At the end the year the following were the actual percentages of the possible:—orange juice, 23.10; cod liver oil, 22.10; vitamin tablets, 25.28. The uptake of these vitamin food supplements all show a slight increase over the previous year.

CHILD WELFARE CLINCS—

Number of Clinics at the end of the year provided by the Local Health Authority, ...	4
Number of children who first attended clinics during the year and who on the date of first attendance were:—	
(a) under 1 year, ...	786
(b) over 1 year, ...	167
Total number of attendances during the year by children who at the end of the year were:—	
(a) under 1 year, ...	6,428
(b) over 1 year, ...	2,087

The chief work at the clinic is advice on infant feeding and management of the infant, minor ailments being treated at the clinic.

The following cases were referred for hospital and specialist treatment:—

Greenock Royal Infirmary, 43; Ear, Nose and Throat Hospital, 20; Eye Infirmary, 8; Skin specialist, 8; Orthopaedic clinic, 7; Royal Hospital for Sick Children, Glasgow, 12; Gateside Hospital, 3.

The following minor ailments were encountered:—

Malnutrition, 40; Rickets, 2; Congenital abnormalities, 10; Mental defect, 2.

The following vaccinations and immunisations were performed:—

Number of children immunised against diphtheria (APT) ...	47
Number of maintenance injections, ...	28
Number of children immunised against diphtheria and whooping cough (combined antigen), ...	296
Number of children successfully vaccinated, ...	254
Number of children unsuccessfully vaccinated, ...	2

SPECIAL TREATMENT CENTRES:—

Corporation Dental Clinic.—The dental sessions for mothers and young children were continued during the year at Wellpark Clinic and Hillend Clinic. The following were the relevant figures:—

	Hillend. Mothers	Wellpark. Children
Examined, ...	35	45
Treated, ...	32	45

Corporation Ultra-violet light clinic.—One hundred and ninety-five children were treated at this clinic during the year.

DAY NURSERIES AND TODDLERS' PLAYGROUNDS—

One Day Nursery was provided by the Local Health Authority before the National Health Service (Scotland) Act, 1947. This Nursery is capable of caring for a maximum of seventy children each day. Admissions are considered on a priority system, priority being given to:—

(*a*) children of widows, separted wives, unmarried mothers, if working.

(*b*) children of mothers who are ill or otherwise unfit to look after them and, where possible, only when working.

(*c*) children of working mothers whose husbands are ill.

Other cases are admitted according to their economic means and only in exceptional cases where both parents are working.

The Nursery is approved for the training of nursery nurses under arrangements made by the Scottish Nursery Nurses Examination Board.

The average daily attendance was 67, 12 in respect of under two years of age and 55 for the 2 to 5 age group.

Since July, 1948, one additional Toddlers' Playground has been provided making three in all. Each playground holds two three-hour sessions per day from Monday to Friday for children aged three to five, the only qualification for admission being age.

MOTHER AND BABY HOMES—

There is no provision of this nature by the local authority, but use has been made on occasion of the voluntary institution Mission Coast Homes, Saltcoats, which has twenty-two beds for ante-natàl and post-natal cases and thirty-two cots, and also the Glasgow and West of Scotland Seaside Homes, Dunoon.

Twelve mothers and twelve toddlers were admitted to the Saltcoats Homes and three mothers and three toddlers to the Dunoon Homes, during the year, for a period of approximately two weeks.

RESIDENTIAL NURSERIES AND CHILDREN'S HOMES—

There is no residential nursery in the Burgh. There is a Children's Home able to house 20 children under the administration of the Children Committee. A certain number of children are admitted for short periods on account of domestic or other difficulty at home, so that some of the problems encountered under Child Welfare can be at least partially solved by this means.

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948—

No applications for registration were received under the above-named Act.

CARE OF PREMATURE INFANTS—

Arrangements for the care of premature infants have been in existence since 1946 and have altered very little since the National Health Service (Scotland) Act, 1947. Premature equipment, clothing, drugs and a cot are sent out to premature confinements at the request of a midwife or doctor at any time duruing the day or night. This equipment can be renewed for as long as necessary and with it the midwife in charge of each case continues to nurse the premature baby. Prior to the closing of the Children's Ward in the Rankin Maternity Hospital, premature babies could, where home conditions were unsuitable, be admitted there. These babies can now be admitted to the Greenock Royal Infirmary but once again it should be noted that there is no local paediatric appointment. The following table gives the number of premature baby outfits issued since 1947:—1947, 29; 1948, 18; 1949, 28; 1950, 23; 1951, 27; 1952, 26.

During the year premature outfits were sent out for 26 cases, including 4 sets of twins. One of the infants was not premature but suffered from gastro enteritis. One of the premature babies was sent to Gateside Hospital and one to Rankin Memorial Hospital. The remaining 23 babies were as shown in the table. One of the 4½-lb. infants had double talipes.

The following is the relevant information regarding the babies:—

Birth Weight	No.	Condition at Birth	No. of Neo-Natal Deaths	Time of Death			
				Within 24 hrs.	Under 1 wk.	Under 2 wks.	Under 1 mth.
Under 1 lb.	—	—	—	—	—	—	—
2-2½ lbs.	—	—	—	—	—	—	—
2½-3½ lbs.	3	Two Feeble	—	—	—	—	—
3½-4½ lbs.	3	Satisfactory	—	—	—	—	—
4½-5½ lbs.	17	Good	—	—	—	—	—

There were no neo-natal deaths in this group. One infant died at six weeks of broncho-pneumonia and one at 5 months. Most of the infants were over 4½-lbs. and in good condition at birth but many required premature equipment for several weeks before reaching the weight of 5½-lbs. As social conditions were poor in many cases the equipment proved of great help in saving some of these premature infants.

ILLEGITIMATE BABIES—

The number of illegitimate births registered in 1952 was 70. Three of these babies have been adopted and two mothers left Greenock with their babies. The remaining 65 remain in Greenock under the care of their mothers. These babies are all well cared for. Assistance is given to illegitimate mothers at the time of confinement by arranging for hospital confinement if home conditions are unsatisfactory. If the mothers wish to work they are assisted by placing the baby in the Day Nursery, where they are given priority for admission.

STILLBIRTHS—

Number of stillbirths (births of dead children), ...	50
Stillbirth rate, ...	34

Investigation of the above stillbirths reveals the causes as follows:—

(1) Hazards of birth, ... Prolonged labour, 1; breech, 3; B.B.A. (Precipitate labour), 1.	5—10%
(2) Causes pre-existing at birth, ...	45—90%
(a) Foetal abnormality, ...	13—26%
(b) Pre-existing condition of mother, ... Placenta praevia, 1; accidental haemorrhage, 1; toxaemia, 3; premature, 4; macerated, 18; Rhesus antigens, 1; unknown, 4.	32—64%

Of the stillbirths in group (1) one case had been booked for hospital. She was a primipara with prolonged labour treated by caesarian section. The three cases of breech were booked for home confinement. One was a primipara and the presentation was diagnosed during labour when the patient was transferred to hospital. The other two were para four and two and it is not known whether the doctors were aware of the presentation. These two cases were confined at home. The case of B.B.A. was an illegitimate birth in a young mother who had made no arrangements at all for the confinement.

Of the cases in group 2 (*a*) there was no history of any virus infection during pregnancy—eight of the mothers were primipara, one was a para 3, one a para 4, two para 5 and one a para 7. The latter was a twin pregnancy. Nine of the deformities were anencephalics, 2 hydrocephalics, 1 microcephalic, 1 spina bifida.

Of the cases in group 2 (*b*) the case of placenta praevia occurred at 38 weeks and was sent into hospital where caesarian section was performed. The case of accidental haemorrhage was booked for hospital. In both of these cases haemorrhage occurred at about 38 weeks and was severe. All three cases of toxaemia were sent into hospital by the doctor. One was a para 14 pregnancy of 30 weeks duration with severe toxaemia who had refused hospitalisation earlier in pregnancy. Each of the two remaining cases gave birth to a macerated foetus, the pregnancies being of 34 and 36 weeks duration respectively.

In the cases of macerated stillbirth no cause could be found for the stillbirth. Two were twins and three were cases of twins in two of which the remaining twin is alive and in the third the other twin was deformed and stillborn. Most of these stillbirths occurred between 36 to 40 weeks pregnancy except for two which occurred at about the seventh month. One was of an exceptionally high parity, para 13, otherwise there was nothing unusual in the obstetric or medical histories.

Of the four cases of premature birth one was a twin pregnancy of 36 weeks duration. No cause can be found for the remaining three cases which occurred at 29 to 32 and 32 weeks respectively. Two of the premature births were breech.

The mother of the stillbirth due to Rhesus antigens had had two previous stillbirths due to the same cause and there is no possibility of a live birth.

In the four cases where cause was unknown the confinements were normal and there was nothing abnormal during pregnancy. One was a para 10 and one a para 2 in poor general health.

No definite conclusions can be reached when dealing with small numbers but this year the number of stillbirths due to hazards of birth is very low, only 10% as compared with usually 33% so that the bulk of the stillbirths cannot be attributed to lack of obstetrical skill. A multitude of factors, the health and parity of the mother, social and economic factors, probably play a part in the causation of the remaining stillbirths and reduction in this group will be accordingly slower than in group 1. No increase in the efficiency of the midwifery scheme could conceivably have affected this group.

INFANTILE MORTALITY—

Number of deaths of children under 1 year,	52
Rate per 1,000 births, ...	36

The post-natal rate is higher than the neo-natal rate, whereas for Scotland as a whole the post-natal rate is lower, as shown below:—

	Greenock	Scotland
Neo-natal rate, ...	13	22
Post-natal rate, ...	23	13

Roughly two-thirds of the post-natal deaths are due to infections and therefore show scope for further reduction.

Number of deaths classified according to age groups and causes of deaths:—

Causes of Death	Age Groups					
	Under 1 week	1—4 weeks	4 weeks—3 months	3 months—6 months	6 months—12 months	Total Deaths
Premature Birth	5	2	1	—	—	8
Injury at Birth	2	—	—	—	—	2
Asphyxia at Birth	2	—	—	—	—	2
Debility	—	2	—	1	—	3
Congenital Malformations	4	—	1	—	2	7
Pneumonia	2	—	3	4	3	12
Bronchitis	—	—	—	—	—	—
Other Respiratory Infections	—	—	2	1	—	3
Influenza	—	—	—	1	1	2
Diarrhoea	—	—	1	2	—	3
Other Digestive Diseases	—	—	1	—	—	1
Tuberculous Meningitis	—	—	—	1	—	1
Other Infections	—	—	—	—	—	—
Other Causes, ill defined	—	—	3	2	1	6
Whooping Cough	—	—	—	1	1	2
Total Deaths	15	4	12	13	8	52

HEALTH VISITING

On 5th July, 1948, there were 12 health visitors in the employment of the Corporation. Since that time the establishment has been increased to fifteen. Due, however, to the continued shortage of qualified health visitors, this service has been frequently understaffed and in October, 1946, the Corporation approved the recommendation of the Health Committee that this Authority commence a training scheme for health visitors, an allowance of £100 being given to each Student to cover her attendance at the Health Visiting Course and on completion of this training she is expected to remain in the employ of the Health Department for a two year period. The duties undertaken by the Health visiting staff include child welfare visits, attendance at maternity and child welfare and artificial sunlight clinics and also the visitation of notified cases of tuberculosis in order to advise on preventive measures, to ascertain the housing circumstances and to discover and follow up contacts. The health visitor also visits homes employing domestic helps and pays certain visits to investigate re-housing applications. Arrangements are made to link up the work of the health visitors with the general practitioners.

One health visitor is sent yearly to a refresher course.

HOME VISITATION—

The number of visits paid by health visitors during the year was as follows:—

	Number Visited	Total Visits
Expectant mothers, ...	54	54
Children under 1 year of age, ...	1,477	23,223
Children between the age of 1 and 5, ...	5,676	20,230
Tuberculosis cases, ...	1,254	2,955
Other cases, ...	429	429
Total Visits paid, ...		46,891

Number of infants at age of six months found to be:—

(i) Breast fed, ...	149
(ii) Partially breast fed, ...	117
(iii) Artificially fed, ...	948

HOME NURSING

The arrangements for this service are made by the Greenock District Nursing Association, the salaries of the nurses and 50% of the housekeeper's salary being paid by the Corporation of Greenock. Eight nurses are employed, seven of whom are Queen's Nurses. Of these seven Queen's Nurses one is a Queen's male nurse. A comfortable home is provided and is maintained by a cook-housekeeper and two maids. Three cars are provided for the use of the nursing staff.

The upkeep of the Nurses' Home, maids' salaries, 50% of the housekeeper's salary, the cost of running and maintaining the cars, equipment for nurses' bags and equipment for loan to patients, is all the responsibility of the Nursing Association.

Co-operation with the general practitioners is excellent and two of their number are members of the Committee of the Nursing Association. Notification of cases leaving hospital is sent direct to the Nurses' Home.

Classification and proportions of the main types of cases attended during the year 1952 are as follows:—Medical, 709; Surgical, 170; Gynaecological, 27; Tuberculosis, 95; Total visits, 27,142.

One nurse is on duty every evening till 10 p.m., after which each nurse is "on call" for her own district. No night calls were received during the year 1952.

Two nurses were sent by the Nursing Association in March, 1952, to a combined midwifery and Queen's Nurses Refresher Course. No training is offered in Greenock for District Nursing.

No consultations are carried out in the Nurses' Home and only emergency cases are treated there.

DOMICILIARY MIDWIFERY

This Service altered little with the introduction of the National Health Service (Scotland) Act, 1947. Ten midwives are employed at present by the Local Health Authority and two by the Greenock District Nursing Association. The Burgh is, for the purposes of the Domiciliary Midwifery Scheme, arbitrarily divided into six districts and to each district two midwives are allocated.

A Superintendent Nursing Officer was appointed for the first time in Greenock in May, 1952, and is now responsible for supervising the midwives.

All midwives have had training in the administration of gas and air analgesia and within the Service there are 18 sets of gas and air apparatus available. Midwives also administer pethidine under the instruction of the doctor booked for the confinement.

The expectant mother engages the services of a midwife at the Health Department and the midwife is notified immediately so that regular ante-natal supervision can commence. When time permits the midwives also attend Local Health Authority Ante-natal Clinics. The midwives work in districts co-operating with the local medical practitioners and the Local Authority medical officers maintain liaison with the family doctors of expectant mothers attending Local Authority clinics.

As the demand for beds in the Rankin Maternity Hospital is very considerable, hospital confinement is recommended on medical and social grounds. Medical recommendation is made by the Maternity and Child Welfare medical staff. Patients with unsuitable housing conditions and who are overcrowded are recommended for admission to the hospital by the Medical Officer of Health. Emergency cases can be admitted to the hospital from the clinic or from the district by arrangement with the obstetrician. The recommendations of general practitioners are considered by the Medical Officer of Health on social or medical grounds.

Since the National Health Service (Scotland) Act, the Local Health Authority has recommended that two midwives attend refresher courses every year.

Training of pupil midwives is carried out at the maternity hospital, while their domiciliary experience is gained by attending confinements and puerperal visits on the district, of cases booked by the domiciliary midwife.

BIRTHS—

(*a*) Total number of births occurring in the area during year—that is before correction for mother's residence —live births, 1,523—stillbirths, 50 ... ... Total 1,570 (*b*) Total number of births in (*a*) occurring in institutions including private maternity homes 899

(*c*) Total number of births in (*a*) occurring at home ... 671

The following are the relevant figures:—

Number of ante-natal visits	7,635
Number of post-natal visits (routine)	13,112
Number of special post-natal visits	233
Number of Maternity Bundles issued	721
Deaths of babies within 14 days of birth	3
Stillbirths	14
Cases of ophthalmia neonatorum	5
Cases of puerperal sepsis	—
Cases of puerperal pyrexia	1

Medical assistance was called under the 1915 Act in one emergency, an intra-natal case.

One notification of having laid out a dead body was received as required by the Central Midwives Board and the Ophthalmia Neonatorum Regulations.

The Scheme was under the direct supervision of the Assistant Medical Officer of Health (Child Welfare) who controls the arrangements.

(*d*) No. of births in (c) classified to show nature of attendance at birth:—

	Cases dealt with under Section 23 (2) of the National Health Service (Scotland) Act, 1947			Other domiciliary cases			Total
	Doctor engaged and present at confinement	Doctor engaged and not present at confinement	Midwife alone (no doctor engaged)	Doctor and Midwife eng'd.	Midwife alone (no doctor engaged)	Without doctor or midwife	
(*a*) Midwives employed by the Local Authority	34	518	—	—	—	—	552
(*b*) Midwives employed by Voluntary Organisations under arrangements made by the Authority	6	103	—	—	—	—	109
(*c*) Private practising midwives	—	—	—	10	—	—	10
(*d*) Totals	40	621	—	10	—	—	671

(*e*) **Medical Aid** under Section 14 (1) of the Midwives (Scotland) Act, 1951, by a Midwife:—

(1) for Domiciliary Cases 1

(2) for Institutional Cases ... ... —

Total 1

(*f*) **Administration of Analgesics:—**

(1) No. of midwives in practice in the area qualified to administer gas and air analgesia in accordance with the requirements of the Central Midwives Board for Scotland (including the Superintendent Nursing Officer, midwives employed by the District Nursing Association and private practicing midwives) ... 16

(*a*) No. in (1) employed on local health authority work 14

(*b*) No. in (1) not employed on local health authority work 2

(2) No. of domiciliary midwives who received their training during the year ... ... —

(3) No. of sets of Apparatus for the administration of gas and air in use in the area at 31st Dec., 1952 ... 18

(*a*) No. in (3) in use by domiciliary midwives employed on local health authority work ... 18

(*b*) No. in (3) in use by domiciliary midwives not employed on local health authority work —

(4) No. of sets on order at 31st Dec., 1952 ... ... —

(5) No. of cases in which gas and air was administered by midwives in domiciliary practice during the year (including cases attended by hospital midwives undertaking domiciliary cases):—

(*a*) When doctor was not present at delivery 311

(*b*) When doctor was present at delivery ... 21

(6) No. of cases in which pethidine was administered by midwives in domiciliary practice during the year (including cases attended by hospital midwives undertaking domiciliary cases):—

(*a*) When doctor was not present at delivery 361

(*b*) When doctor was present at delivery ... 24

(*g*) No. of Cars in use by midwives at 31st Dec., 1952 ... —

DOMESTIC HELP

This Service was provided by the Local Health Authority before the National Health Service (Scotland) Act, 1947, and has not extended since. No training facilities for Home helps exist in the Burgh and indeed are not required in view of the small numbers of only part-time helps employed.

The following table shows the type and number of cases using the Service since 1948:—

	No. of Helps		Type of Case		
	Whole Time	Part Time	Con-finements	Other Illness	Total
1948	1	16	87	42	129
1949	1	11	72	51	123
1950	—	11	62	47	109
1951	—	12	33	45	78
1952	—	10	32	58	90

The means of each person applying for a Home Help and unwilling to pay the full charge is assessed and thereafter the charge intimated according to a graduated scale.

Home Helps are sent to houses in which there has been a confinement or where other illness exists. The maximum period of attendance of a Home Help is six weeks. Before a Home Help is sent to a household in which there is a case of pulmonary tuberculosis she is informed of the type of illness.

VACCINATION AND IMMUNISATION

Vaccination against smallpox and immunisation against diphtheria and whooping cough are advocated by the Health visitors in the homes. A letter advocating vaccination is sent out when each child is two months old and others at one year and five years, advising immunisation. Vaccination is recommended between the age of three and four months and combined whooping cough and diphtheria immunisation from the age of six months. Boosting injections are performed on children of five years at the child welfare clinics. The Depute Medical Officer of Health also visits the schools for this purpose.

During the period under review the response to propaganda advocating vaccination against smallpox has been disappointing. Local Authority medical staff have, by personal contact, done their best to persuade mothers to have vaccination performed but there remains a very resistent and large core of so called conscientious objectors.

In the year 1948 there were 710 children vaccinated of whom 253 were vaccinated by Local Authority medical staff. In the year 1952, 477 children were vaccinated of whom 262 were vaccinated by Local

Authority medical staff. It will be seen from this that the amount of vaccination carried out in Child Welfare Centres has not appreciably altered although that performed by general medical practitioners has declined. The medical practitioners are, however, co-operating with this department in an attempt to improve on this state of affairs.

The following table gives the figures for the past few years for immunisation carried out by the staff of the Local Health Authority:—

Year	Pre-School Children		School Children		Total	
	Primary	Maintenance	Primary	Maintenance	Primary	Maintenance
1948	1,015	—	1,027	400	2,042	400
1949	1,078	229	362	1,089	1,440	1,318
1950	794	235	478	1,318	1,272	1,553
1951	736	319	377	1,073	1,113	1,392
1952	580	10	245	667	825	677

PREVENTION, CARE AND AFTER-CARE

The Local Authority have confined their work under this section to the care of persons suffering from tuberculosis and to preventive measures directed against this disease. Since the National Health Service (Scotland) Act, 1947, there has been a great increase in the preventive measures taken against tuberculosis. Prior to the National Health Service (Scotland) Act, 1947, there were only two full-time and one part-time nurse working in the Tuberculosis Dispensary and doing home visitations. Since 5th July, 1948, all health visitors employed by the Local Authority are responsible for home visitation of notified tuberculosis cases in their district. The work of this department, in relation to tuberculosis, is carried out in co-operation with the Tuberculosis Clinic and the local medical practitioners. The health visitor visits each newly notified case of tuberculosis, giving advice on general care and the prevention of the spread of the disease, and records the housing circumstances with particular reference to the presence of overcrowding. She ascertains the contacts of each case and arrangements are made for their attendance at the tuberculosis dispensary. The health visitors attend the Tuberculosis Clinic once monthly and have the opportunity of discussing their own cases with the Tuberculosis Physician. When a contact is found to require B.C.G. vaccination the health visitor reports on the housing circumstances and states whether home isolation of the contact is possible.

Assistance in the form of free milk, bed and bedding, is given by the Local Authority to cases recommended by the Tuberculosis Physician.

SOCIAL SERVICE—

The National Assistance Board help patients under certain circumstances.

Beds and bedding were supplied to necessitous cases—27 males and 20 females.

Clothing was supplied to one female during the year.

During the year 70 tenants and 27 sub-tenants in families where tuberculosis existed were re-housed to new houses or in houses of a size to prevent overcrowding.

The notification figures are as follows:—

PULMONARY DISEASE												
1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952
140	152	159	195	202	180	181	263	277	273	236	215	279

NON-PULMONARY DISEASE												
41	45	60	48	69	65	70	89	70	41	35	16	36

The following table shows the number of cases notified during 1952 and in which the diagnosis has been confirmed.

		AGE-GROUPS									
		Under 1	1 and under 5	5 and under 10	10 and under 15	15 and under 25	25 and under 35	35 and under 45	45 and under 65	65 and upwards	Total
Respiratory	(Males)	4	13	12	10	22	24	22	28	5	140
	(Females)	2	14	10	17	51	23	10	7	—	134
	Total	6	27	22	27	73	47	32	35	5	274
Non-respiratory	(Males)	1	1	1	2	4	—	2	1	—	12
	(Females)	—	—	—	3	9	6	1	4	—	23
	Total	1	1	1	5	13	6	3	5	—	35
Respiratory and non-respiratory	(Males)	5	14	13	12	26	24	24	29	5	152
	(Females)	2	14	10	20	60	29	11	11	—	157
	Total	7	28	23	32	86	53	35	40	5	309

The following table shows the number of cases with their home residence in the area who received treatment in sanatoria or other institutions during the year:—

			NUMBER OF PATIENTS				
			In Institutions on January 1	Admitted during the year	Discharged during the year	Died in the institutions	In Institutions on December 31
Respiratory	Adults	Males	82	81	79	6*	78
		Females	65	70	71	4*	60
	Children	Males	6	8	8	—	6
		Females	5	7	5	—	7
Non-Respiratory	Adults	Males	4	6	3	—	7
		Females	4	14	13	1†	4
	Children	Males	6	2	5	—	3
		Females	6	—	2	—	4
Total			178	188	186	11	169

*1 Male, notified respiratory, died in Sanatoria of other causes.

*1 Female, notified respiratory, died in Sanatoria of other causes.

†1 Female notified non-respiratory, died in Sanatoria from Respiratory Tuberculosis.

The following table shows the total number of verified cases of tuberculosis known to have their homes within the Burgh:—

(Only cases in which a diagnosis of tuberculosis has been confirmed are included. Persons in sanatoria, etc. are included in the figures for the area in which they have their home residence).

		Number of Cases in Age-Groups									Total
		Under 1	1 and under 5	5 and under 10	10 and under 15	15 and under 25	25 and under 35	35 and under 45	45 and under 65	65 and upwards	
RESPIRATORY :											
1. Sputum or other material exam. and tubercle bacilli found	(M.)	—	—	—	—	4	18	25	24	2	73
	(F.)	—	—	—	—	22	15	6	1	—	44
2. Sputum or other material examined and tubercle bacilli never found	(M.)	—	—	3	6	30	33	25	21	4	122
	(F.)	—	2	4	6	47	34	17	8	1	119
3. Sputum or other material not examined	(M.)	4	25	39	35	98	83	49	47	10	390
	(F.)	2	22	35	41	144	108	34	18	—	404
TOTAL		6	49	81	88	345	291	156	119	17	1152
NON-RESPIRATORY :											
1. Abdominal	(M.)	—	—	—	—	1	1	—	—	—	2
	(F.)	—	—	—	—	3	4	—	—	—	7
2. Spine	(M.)	—	—	2	1	2	2	1	1	—	9
	(F.)	—	—	1	1	6	7	1	2	—	19
3. Bones and joints (exclusive of spine)	(M.)	—	—	4	4	9	6	2	1	—	26
	(F.)	—	—	4	4	5	4	1	—	—	18
4. Superficial Glands	(M.)	—	1	2	5	4	—	3	1	—	16
	(F.)	—	1	3	6	8	5	2	1	1	27
5. Lupus	(M.)	—	—	—	1	—	—	—	—	—	1
	(F.)	—	—	1	—	—	—	—	—	—	1
6. Other parts or organs	(M.)	—	—	2	—	4	1	5	—	—	12
	(F.)	—	1	1	5	3	3	—	—	—	13
TOTAL		—	3	20	27	45	33	16	6	1	151
RESPIRATORY AND NON-RESPIRATORY TOTALS		6	52	101	115	390	324	172	125	18	1303

Early in 1952 the Corporation, along with the Burgh of Paisley and the County of Renfrew, commenced a scheme of B.C.G. vaccination of children of school leaving age. Before that date B.C.G. vaccination had been offered only to nurses, medical students and contacts.

The following table shows the numbers of persons tuberculin tested and the number of B.C.G. vaccinations performed during the year 1952:

Group	Tuberculin tested		Negative re-actors		Successfully vaccinated	
	M.	F.	M.	F.	M.	F.
Nurses	—	6	—	6	—	6
Medical Students	—	—	—	—	—	—
Contacts	95	113	83	93	73	83
School leavers	1059	1027	522	547	509	536

MASS RADIOGRAPHY—

The Mass Radiography Unit, controlled by the Western Regional Hospital Board, visited the Burgh during September and October, 1952, and a total of 3,321 persons (1,843 males; 1,478 females) were examined on miniature films. Of this total 1,381 (729 boys and 652 girls) were school children and 1,940 were adults. It is estimated that 56% of all those school children to whom facilities for examination were offered accepted, which is considered a reasonable response. The Education Authority's staff gave satisfactory co-operation and no difficulties of any major kind were encountered. Of the total number of persons examined 157 persons were recalled to have large films taken, giving a recall rate of 4.7%. Four males and 6 females were recalled for examination by the cardiologist. Nine of these 10 persons were found to have abnormalities of the heart but only one of these nine persons was a school child.

Four males and 13 females examined had lesions which were almost certainly those of active respiratory tuberculosis. This does not mean that they were all in need of active treatment as experience shows that the natural course of the disease in many of these cases is towards healing. These figures present an active incidence of 2.1 per thousand in males, 8.7 per thousand in females and a total incidence of 5.1 per thousand. The higher incidence in females is not unexpected since a large proportion of the females examined were in younger age groups in which active tuberculosis is commonly found. The incidence of 2.1 per thousand recorded in school children is comparable with the incidence usually found in this group.

Thirty-six males and 10 females had lesions which were certainly or almost certainly inactive, giving an incidence of 19.5 per thousand in males, 6.7 per thousand in females and 13.8 per thousand in the total numbers examined. The high incidence of inactive lesions in males, in comparison with females, is accounted for by the predominance of the older age distribution of the men examined. The incidence of inactive lesions in school children was 6.5 per thousand and is comparable to the incidence usually found in similar industrial areas.

Thirteen people were examined in whom a diagnosis of respiratory tuberculosis had been established prior to their examination in the present survey.

All persons recalled for a full sized X-ray were informed by letter of the findings. When the findings were at all significant a report, together with an indication of the action considered advisable, was sent to the private doctor concerned. Cases likely to require early treatment were referred to the Area Supervising Chest Physician and copies of all reports and the appropriate X-ray plates of all cases likely to require repeat examinations were also sent to the Chest Physician.

The Mass Radiography Unit continues to serve a very useful purpose in the community, giving as it does a periodic check up on both the young poulation approaching school leaving age and also of industrial workers, with special emphasis on those groups known to be liable to a high incidence of this disease. Cases which might otherwise escape observation are brought to notice and an early commencement of treatment is assured.

MENTAL HEALTH

The Mental Health Services of the Local Health Authority are the responsibility of the Health Committee. The Welfare Officer acts as Authorised Officer and visitations are carried out by the Assistant Welfare Officer and a part-time nurse qualified in mental nursing. The Resident Caretaker at the Health and Welfare Department acts, when required, as Removal Officer.

The supervision of patients on trial or licence from mental hospitals or mental deficiency institutions is undertaken by the Authorised Officer.

The supervision by visitation of the less difficult uncertified mental defectives is delegated to the Greenock and District Voluntary Association for Mental Health and is carried out under the supervision of the Authorised Officer.

The Assistant Welfare Officer and the visiting nurse have received instruction in Mental Health social work from the Authorised Officer.

Under Section 27 of the National Health Service (Scotland) Act, a psychiatric clinic was set up two years ago in Local Authority premises, the Consulting Psychiatrist being the Medical Superintendent of the local mental hospital.

The number of cases certified to be of unsound mind and admitted to mental hospitals has remained static, in the region of 27 per annum, but every possible opportunity is taken to enable persons to enter mental hospitals as voluntary patients and the number taking advantage of this has increased steadily. In 1952 the admissions totalled 47, an increase of 11 over 1951.

The discharge on Pass, probation or liberation of patients from mental hospitals is carried out by co-operation between the Medical Superintendent and the Authorised Officer.

The medical and educational records of all mentally handicapped pupils leaving or being discharged from the Special School are received by the Authorised Officer from the Administrative School Medical Officer. They are all visited and in co-operation with the Juvenile Employment Officer of the Ministry of Labour are assisted to obtain employment. Those who are stable and living in good homes are subsequently visited by the Local Voluntary Association for Mental Health and the more difficult cases are supervised frequently from the Health and Welfare Department.

During the year 1952 three new cases were certified and placed under guardianship, the total at the end of the year being 23 with a further 6 cases in Part III accommodation, these being unsuitable for guardianship but for whom no accommodation in institutions could be found.

Owing to the difficulty in obtaining suitable premises it has not yet been possible to establish an occupation centre for mental defectives over the age of sixteen.

SCHOOL HEALTH SERVICE

Routine examinations were completed before the end of the school year in spite of the fact that there was a shortage of staff. The examination of seven year old children for visual and hearing defects was carried out by the nurses. Much work is also done by the nurses to get the children up to the necessary standard of cleanliness at all times and so that they may go to school camp. The condition and cleanliness of clothing and body are usually satisfactory, but it is difficult to get parents and children to realise that hair must be free of any infestation (vermin or nits) before they can be "passed" fit for admission to camp. This leads to some children being disappointed, and unfortunately it is often those who most need the holiday who have to be refused on this account. This should not be necessary if parents would play their part. It has to be emphasised that, on the whole, the general cleanliness and standard of hygiene have improved a great deal. There is need for constant vigilance, however, on the part of parents and school nurses. It must be remembered that a high standard is demanded and any child with any nits (dead or alive) is classified as infested. Adults in the house must also use the same precautions as should pre-school children.

The number of children who are actually verminous is very small, but one verminous child in a class can lead to a large proportion of the class being infested in a very short time, unless parents use one of the effective preparations on the market as a preventive as well as a curative measure, and are constantly examining and tooth-combing the hair.

Fortunately, scabies is almost non-existent and there are few cases of impetigo. There have been a few cases of body vermin and when this occurs the whole family is promptly cleansed. The bedding and the house are disinfested when children are found flea bitten or with body lice. These cases are fortunately few.

The co-operation of head teachers and teachers is very much appreciated and their constant interest in the health and cleanliness of the children can re-inforce the nurses' all too infrequent visits to the schools. The number of nurses employed does not allow them to visit the schools as frequently as they would wish, as they have many other duties.

Thanks are due to the nurses and office staff for loyal co-operation and conscientious work during the session.

The following are the details found at medical inspection of children during the year:—

FIGURES FOR SESSION 1952-53

Average Number of Children on the Rolls

Ordinary schools,		13,193
Glenburn Schools—Physical Division,	85	
Mental Division,	167	
Sight-saving class,	20	
		272
Garvel (Oral School for Deaf),		15
Holeburn School (Occupational Centre),		21
Total,		13,501

Routine (Systematic) Examinations (Doctor and Nurse)

Number of Children examined:—

Nursery Class (Craigieknowes School),	23
Entrants (5 years old plus),	1,387
Second Age Group (9 years old plus),	1,188
Third Age Group (13 years old plus),	1,271
Secondary Schools Age Group (16 years old plus),	113
Total,	3,982
7 year old Group (vision and hearing only),	1,030
Grand Total,	5,012

Defects Discovered at Routine Examinations

		Nursery School
No. of children with defects of vision and/or teeth,	597	1
No. of children with minor defects (other than above) where complete recovery anticipated within a few weeks,	848	4
No. of children with more serious defects,	46	—
Total,	1,491	5

Note.—The parents of children suffering from a defect other than dental caries were informed. Advice and treatment in the case of dental caries are the care of the School Dental Department.

Non-Routine Examinations (Nurse)

Treatment required and parent informed	2,629
No action required,	724
Total,	3,353

Principal Defects found at Non-routine Examinations:—

Uncleanliness of Head,	1,147	
Uncleanliness of Body,	134	
Unsatisfactory condition of clothing,	128	
Unsatisfactory condition of footgear,	27	
		1,436
Defect of vision,		509
Other defects,		684
Total,		2,629

Examination for Special Purposes

(a) for Employment Licences (Doctor),	142
(b) for Residential Camp Schools (Doctor and Nurse),	546
(c) Re-examinations Camp Schools (Nurse),	1,978
(d) Home visits (Nurse),	754

CLINICS—

A. Minor Ailments Clinic

	Attendances	No. of children
Number of attendances, ...	10,267	1,748
Nature of cases:—		
(i) Cuts, bruises, injuries, etc.	363	138
(ii) Diseases of Ear, Nose and Throat, ..	3,901	240
(iii) Diseases of Eye, ...	942	198
(iv) Diseases of Skin, ...	5,061	1,172

B. Doctor's Inspection Clinic

Number of Special Cases examined, ...	1,010

C. Eye Specialist's Clinic

Number of children examined, ...	447
Number of children re-examined, ...	179
Number of children for whom spectacles were prescribed, ...	338
Number of children treated otherwise or advised, ...	109

D. Ear, Nose and Throat Specialists' Clinic

Number of children examined, ... 270 (attendances 535)

Cases of enlarged Tonsils and Adenoids, ...	131
Operations advised, ...	92

GREENOCK (BURGH) SCHOOLS—ATTENDANCES AT CLINICS—SESSION 1952-53

SCHOOLS	Number on Roll	Cuts and Bruises		Ear, Nose and Throat		Eye		Skin		Others		Totals	
		Cas.	Att.	Cas.	Att.	Cas.	Att.	Cas.	Att.	Cas.	Att.	Cas.	Att.
The Academy	946	—	—	—	—	—	—	3	16	—	—	3	16
Ardgowan	529	1	5	2	6	9	30	14	72	—	—	26	113
Belville Place	585	3	7	12	312	7	43	52	166	4	4	78	532
Craigieknowes	359	18	61	19	89	22	116	100	348	4	4	163	618
Finnart	623	—	—	2	3	10	41	12	45	—	—	24	89
Garvel	15	—	—	—	—	—	—	—	—	—	—	—	—
Glenburn	267	—	—	—	—	—	—	3	11	—	—	3	11
High	734	—	—	—	—	—	—	5	8	1	1	6	9
Holeburn	21	—	—	—	—	—	—	—	—	—	—	—	—
Highlanders' Academy	588	—	—	10	94	1	2	12	36	—	—	23	132
Hillend	502	1	7	9	93	—	—	18	64	1	1	29	165
Holmscroft	512	1	2	13	176	6	49	23	128	1	2	44	357
The Lady Alice	699	4	7	23	186	11	82	89	467	2	2	129	744
Ladyburn	575	1	2	11	261	8	27	44	187	3	3	67	480
Mearns Street	657	—	—	14	58	12	69	29	99	—	—	55	226
The Mount	554	1	1	10	203	9	43	26	126	7	7	53	380
Ravenscraig	343	—	—	12	148	2	6	12	46	—	—	26	200
St. Columba's	652	1	3	7	164	6	42	5	7	1	1	20	217
St. Lawrence Boys'	490	30	87	12	778	7	34	169	781	4	4	222	1,684
St. Lawrence Girls'	542	21	54	19	420	34	159	107	528	6	6	187	1,167
St. Mary's Patrick Street	1,440	34	63	27	197	13	41	135	524	5	5	214	830
St. Mary's Annexe (Loreto)		1	3	3	321	5	22	24	120	—	—	33	466
St. Mary's Ingleston Huts		3	5	—	—	2	21	15	67	1	1	21	94
St. Mary's Infants	1,130	—	—	1	4	3	3	27	76	—	—	31	83
St. Mary's Girls'		3	5	12	101	10	52	35	192	—	—	60	350
St. Mungo's	756	15	51	22	287	21	60	137	643	7	7	202	1,048
Others		—	—	—	—	—	—	76	304	—	—	76	304
Totals	13,501	138	363	240	3,901	198	942	1,172	5,061	47	48	1,795	10,315

BACTERIOLOGICAL EXAMINATIONS

All specimens for investigation were examined at either Hawkhead Emergency Laboratory, Paisley or the Western Infirmary, Glasgow. Some of these were sent by this department and others by hospitals and medical practitioners in the Burgh. The figures are as follows:—

Tuberculosis Clinic, ...	1,476
Private Practitioners, ...	610
Gateside Hospital, ...	432
Larkfield Hospital, ...	230
Royal Infirmary, ...	127
Ravenscraig Hospital, ...	33
Rankin Memorial Hospital, ...	30
Ear, Nose and Throat Hospital, ...	23
Health Department, ...	12
Eye Infirmary, ...	2
Total, ...	2,975

PORT SANITARY ADMINISTRATION

During the year the routine arrangements continued whereby Greenock Port Authority administered the provisions of the Port Sanitary Regulations (Scotland), 1933, in relation to the shipping in the port. These Regulations were evoked and replaced by the Public Health (Ships) (Scotland) Regulations, 1952, which came into operation on 1st October, 1952, but there have been no significant changes in procedure.

The number of vessels boarded by the staff of the Department was 141 as compared with 122 last year. In one instance where the ship had arrived from infected ports the crew was mustered and medically inspected. No cases were removed to hospital.

The goods carried in 58 ships included sugar, copra, palm kernels, steel plates, potash, iron ore and crude oil. Sixteen ships docked for overhaul, one for bunkers, 7 for loading, 3 for towing purposes, while in addition 31 weather ships docked in the Great Harbour, which is their base.

A general examination of the crews living spaces was carried out in each ship and in most cases the sanitary condition was found to be satisfactory. In others defects were pointed out for appropriate action.

Deratization.—Every ship which entered the harbours was surveyed for rat infestation and during the year under review trapping was found necessary in eight ships, 184 rats being recovered, and fumigation in 3 ships, 26 rats being recovered.

Five of the ships had valid deratization certificates, 77 valid exemption certificates and 17 had certificates which were not valid (2 deratization and 15 exemption) while 4 had no certificate of any kind. In 13 of these latter cases certificates were issued and in 8 the ships sailed without valid certificates. The ocean weather ships do not require a certificate.

Three deratization certificates were issued, all after fumigation with hydrogen cyanide. In addition 41 exemption certificates were issued. Included in the 44 ships to which a certificate of some sort was given were certain ships not mentioned above, for example, new ships, coasters and one which had arrived in the previous year. In addition certificates were also issued to certain ships whose current certificate was still valid.

Passengers.—Thirty-eight passengers were landed from those ships which carry cargo for discharge at the various docks. Two seamen were removed to Gateside Hospital suffering from infectious disease.

Regular trans-atlantic sailings of passenger liners, which were resumed in 1950, continued during the major part of the year. In all 2,430 passengers were landed at this port. One passenger was admitted to Gateside Hospital with suspected poliomyelitis but the diagnosis was not confirmed.

In addition to the foregoing, two navymen were admitted to Gateside Hospital with infectious disease.

Registration of the telegraphic address "Portelth, Greenock" was renewed during the year.

DISINFECTION

The primary purpose of the Disinfecting Station is to render safe by disinfection, and in some cases washing, clothes which have been in contact with persons suffering from infectious disease.

Of late years, however, this function has been very greatly extended and the plant is now largely used to disinfect and wash articles of equipment used by the Health Department in its various activities, for example office towels, home help overalls, coats and sheets, etc., from clinics, bedding from premature baby cots and a large proportion of the clothing used in the Day Nursery.

This work is considered essential to the conduct of the department and some of the problems which arise would be almost impossible of solution by any other means.

The total number of articles dealt with was as follows:—

General infectious diseases, ...	1,918
Tuberculosis, ...	2,351
Vermin infestation, ...	443
Scabies, ...	85
Special cases (not infectious or parasitic), ...	8
Health Department, General Purposes, ...	734
Destroyed by request, ...	113
Home Helps, ...	172
Precautionary, ...	48
Police, ...	56
Premature babies, ...	1,279
Child welfare, ...	1,711
Day Nursery, ...	10,964
Total, ...	19,882

Of the above numbers 3,247 articles were disinfected by steam and 16,454 by disinfectant solution.

RECEPTION HOUSE

The Reception House is still retained as a useful part of the department's premises. It is looked after by a non-resident caretaker and is maintained in a state of partial preparedness as part of the arrangements to deal with sudden and unforeseen emergencies in relation to which temporary accommodation might be required for homeless people. Verminous families are cleansed as a unit in the Reception House whilst the property and clothing are concurrently disinfected.

One room is let to a general practitioner as a consulting room.

Part of the building is also used as a Maternity and Child Welfare Clinic and as a minor ailments clinic by the School Medical Service.

In the same curtilage is the Craigieknowes Toddlers' Playground, so that the buildings form a convenient unit for varied activities.

HEALTH EDUCATION

The staff of the Health Department carry out this work daily in the clinics, schools and in homes. Their aim is not only to educate the public to prevent disease and ill health but to help the community to achieve optimum health, both physical and mental, through correct living.

The work of the Health Visitors is mainly educational and a refresher course in Health Education was given to them by Dr Mearns, Medical Lecturer to the Scottish Council for Health Education, during the year. In the main, education of this type is given individually but various members of the staff gave talks on health matters to Women's Guilds and other organisations. Posters and leaflets on health matters are available at all clinics, at the Health and Welfare Department offices, and are distributed in the homes.

A Clean Food and Health Exhibition was held in Greenock in October, 1952, for five days. The Exhibition was visited by 14,333 persons. Local cinemas and the press co-operated in giving the exhibition extensive publicity.

The Exhibition demonstrated the importance of food hygiene and also informed the public of all the health services available to them, including the Maternity and Child Welfare Service, the School Medical Service and the Preventive Services against Tuberculosis.

REGISTRATION OF NURSING HOMES

Under the Nursing Homes Registration Act, 1938, only the Glenville Nursing Home, Ravenscraig, is registered. Inspection was carried out during the year and conditions found to be satisfactory.

In addition three institutions were exempted from the provisions of the Act. These were:—Little Sisters' of the Poor, Medical Aid Home and the Children's Convalescent Home.

FOOD SUPPLY

MILK AND DAIRIES.—There were at the end of 1952 six dairy farms registered. At these farms there were 116 cows of which 95 were milk. In addition three farms are exempt from registration.

There are 99 registered dairies and 4 pasteurising establishments within the Burgh.

Samples taken from local producers numbered 36 and of these 4 were found to be unsatisfactory owing to the presence of coli bacilli in 3 instances and to the high bacterial count in 1 instance.

The number of samples taken from other sources totalled 493 as follows:—Schools and School Kitchens, 154; Hospitals and Institutions, 52; Pasteurising Establishments, 104; Wholesale Dealers' and Retailers' Premises, 159; Outside Producers retailing within the Burgh, 3; and Outside Producers supplying Wholesale Dealers, 21.

Further details of the samples were as follows:—

Designation of Milk	No. of Samples	No. Satis.	No. Unsat.	Unsatisfactory by reason of			
				Bact. Count	Coli. Bac.	Phos-phat-ase	2 or more tests
Certified	39	25	14	3	9	—	2
Tuberculin-tested	43	26	17	3	6	—	8
Tuberculin-tested (Pasteurised)	28	22	6	—	4	2	—
Pasteurised	362	305	57	—	50	6	1
Ordinary	21	15	6	—	5	—	1
Total	493	393	100	6	74	8	12

Ice Cream.—Samples were taken for bacteriological examination with the following results:—

Number Taken	Number Satis-factory	Number Unsatis-factory	Unsatisfactory by reason of:—		
			Coliform Bacilli	Bacterial Count	Bacterial Count and Coli Bac.
140	97	43	12	8	23

MEAT INSPECTION

Mr D. Bogle, Superintendent of the Abattoir, has kindly supplied the following information regarding the work carried out there during the year ended 15th May, 1953:—

Number and Type of Animal Slaughtered

CLASS	Number slaughtered	Number affected with Tuberculosis	Percentage affected with Tuberculosis	Whole Carcases seized for Tuberculosis	Parts of Carcases seized for Tuberculosis	Whole Carcases seized for diseases other than Tuberculosis	Parts of Carcases seized for diseases other than Tuberculosis
Bullocks	2,788	170	6.0	1	15	—	22
Bulls	26	—	—	—	—	—	—
Cows	549	32	5.8	2	—	10	33
Heifers	1,406	53	3.0	—	4	5	47
Swine	5,197	49	.9	1	—	3	13
Sheep	27,212	—	—	—	—	45	13
Calves	1,023	—	—	—	—	11	1
Total	38,201	304	.7	4	19	74	129

The following is the list of conditions which were responsible for the total or partial seizure of carcases:—

Total Seizures.—Tuberculosis, 4; Pyrexia, 6; Dropsy, 3; Decomposition, 8; Emaciation, 47; Peritonitis, 2; Pericarditis, 2; Joint Ill, 1; Immature, 1; Jaundice, 2; Generalised Actinomycosis, 1; Injuries, 1.

Partial Seizures.—Tuberculosis, 19; Injuries, 104; Abscesses, 12; Parasitic, 1; Adhesions, 10; Arthritis, 2.

The approximate weight of meat and organs destroyed during the year was 21 tons 13 cwts. 3 qrs. 6 lbs.

HOUSING AND TOWN PLANNING

HOUSING—

New Houses.—Two hundred and ninety-four dwellinghouses erected by the Local Authority were made available as follows:—

Bawhirley Road, ...	2
Larkfield No. 2, A Section, ...	74
South Maukinhill, ...	42
Belville Street, ...	7
Larkfield No. 2, C Section, ...	75
Newark Street, "Stoneleigh,"	14
Auchmead, ...	80

Of this number 271 were occupied as at 31st December. Included in this number were 12 dwellinghouses of four-apartments which were transferred to the Police Authority for the rehousing of Police Officers.

Unfit Houses.—During the year 180 dwellinghouses were represented in terms of Section 9 of the Housing (Scotland) Act, 1950. Of this number undertakings had been received in 102 instances. The number of families rehoused from unfit dwellinghouses during the year was 147. Of this number 35 families comprising 166 persons were rehoused direct, 106 families comprising 401 persons were indirectly rehoused while 6 families comprising 12 persons found their own accommodation.

Decrowding.—Families to the number of 181 (160 tenants and 21 sub-tenants comprising 1,077 persons) were rehoused in new houses, an illness factor existing in 46 of them (44 tenants and 2 sub-tenants).

In addition, 43 families were rehoused under the heading of general housing.

Re-lets.—Two hundred and fifty-five dwelling houses were made available for re-letting during the year.

Summary of New Dwellinghouses Allocated—

Decrowding,	181
Unfit Properties,	35
General Housing,	43
Police,	12
Total,	271

TOWN PLANNING—

The following information was kindly supplied by the Master of Works:—

Control of Development—

This work involved the investigation of 106 applications for planning permission in respect of residential, commercial and industrial development, and 23 applications for permission to display advertisements.

Development Plan—

Following the submission of the Development Plan to the Secretary of State on 26th December, 1951, and the depositing of a copy of the Plan in the Municipal Buildings for inspection by the public, nine objections and one representation were received by the Secretary of State. A Public Inquiry into the objections to the Plan was held. It commenced on 18th November, 1952, was adjourned from 26th November, 1952 to 19th January, 1953, and was concluded on 21st January, 1953. The decision of the Secretary of State has not yet been announced (17th April, 1953)

Certificates of Occupancy—

During the year ending 18th October, 1952, certificates of occupancy have been granted for 241 dwellinghouses.

For Private Enterprise:—

Conversion of large houses into flats,	13
New Houses,	10
Rebuilt War-damaged dwellings,	37
Total,	60

For Greenock Corporation—

South Maukinhill, ...	66
Larkfield, Section "A", ...	34
Larkfield, Section "C", ...	18
Larkfield (SWVGCA), ...	14
Auchmead, ...	34
Bawhirley Road, ...	4
Old Inverkip Road, ...	4
1 Belville Street (rebuilt W.D. dwellings), ...	7
Total, ...	181

WATER SUPPLY

The following information has been kindly provided by the Water Engineer:—

The supply of water for domestic use amounted in the year to 1,959,757,000 gallons which is equivalent to 5,355,000 gallons per day or 69 gallons per head of population per day.

The total water supplied for all purposes for the year amounted to 4,959,180,000 gallons, equivalent to 13, 624,000 gallons per day.

The whole of the filtered water supply continued to be chlorinated after filtration and the bacteriological analyses of the supplies showed the water to be highly satisfactory.

Periodical analyses were also made by Messrs R. R. Tatlock & Thomson, of Glasgow, of the chemical composition of the water, which showed it to be suitable for drinking and domestic purposes.

METEOROLOGY

The rainfall during the year as recorded at Prospecthill Water Works amounted to 53.79 inches which was only 86% of the average over the 60 years from 1890 to 1949.

The greatest rainfall recorded in 24 hours occurred on 7th August when 2.11 inches fell.

There were 164 dry days during the year.

Bright sunshine recorded during the year amounted to 1,321.8 hours as compared to 1,253 hours for 1951.

SEWERS, WATERCOURSES, ETC.

A considerable amount of clearance of chokages in public sewers has been carried out to existing sewers, the main items being:—

Bank Street.—Repair of several collapsed sewer pipes.

Bentinck Street.—Repair of several crushed and defective pipes.

Shaw Place.—Minor repair of sewer where subsidence has occurred.

Culverts and Watercourses.—Regular cleaning and clearance of burns has been carried out, including Cartsburn Culvert.

FACTORY ACTS

Two hundred and eighteen visits of inspection were made to mechanical and 61 visits to non-mechanical factories. Eighteen notices were served regarding the necessity for sanitary action.

Two lists containing 376 names of outworkers were received and 161 intimations with 253 names were issued to other authorities.

TABLE I—VITAL STATISTICS

Births, Deaths and Marriages—

	Numbers Registered in District	Transfers		Corrected Numbers		
		In	Out	Both Sexes	Males	Females
Total Births (incl. Illegitimate)	1,513	111	32	1,434	730	704
Illegitimate Births	70	3	5	72	34	38
Stillbirths	50	1	1	50	22	28
Marriages	640	—	—	—	—	—
Deaths	986	150	57	893	462	431

TABLE II.—CAUSES OF DEATH (Corrected for Transfers)—REGISTRAR GENERAL, 1952

CAUSES OF DEATH	AGE													ALL AGES			Death-rate per 1,000 of population
	Under 4 wks.	4 wks. -11 mths.	1–	5–	10–	15–	25–	35–	45–	55–	65–	75–	85 and over	Both Sexes	Males	Females	
Tuberculosis of Respiratory System	—	—	—	—	—	2	7	6	5	5	3	—	—	28	18	10	.363
Tuberculosis, Other Forms	—	1	1	—	—	1	—	1	—	1	—	—	—	5	2	3	.65
Syphilis and its Sequelae	—	—	—	—	—	—	—	1	—	—	—	—	—	1	1	—	.013
Typhoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery, All Forms	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever and Streptoccal Sore Throat	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	.013
Meningococcal Infections	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	1	.013
Other Infections and Parasitic Diseases	—	—	—	—	—	—	—	—	—	—	1	—	—	1	1	—	.013
Malignant Neoplasms	—	—	1	—	—	—	1	9	24	33	41	21	4	134	63	71	1.74
Benign and Unspecified Neoplasms	—	—	—	—	—	—	1	—	1	—	—	—	—	2	1	1	.026
Diabetes Mellitus	—	—	—	—	—	—	—	—	—	3	1	1	—	5	1	4	.065
Anaemias	—	—	—	—	—	—	—	1	—	—	2	1	—	4	2	2	.052
Other General Diseases	—	—	—	1	—	—	1	1	—	2	5	—	—	10	2	8	.130
Vascular Lesions Affecting Central Nervous System	—	—	—	—	—	—	—	2	5	24	39	37	5	112	50	62	1.45
Nonmeningococcal Meningitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Diseases of Nervous System	—	—	2	—	—	—	—	—	2	2	1	—	1	8	4	4	.104
Rheumatic Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chronic Rheumatic Heart Disease	—	—	—	—	1	1	1	2	1	2	3	1	—	12	2	10	.156
Arteriosclerotic and Degenerative Heart Disease	—	—	—	—	—	1	—	1	15	30	89	82	26	253	139	114	3.28
Other Diseases of Heart	—	—	—	—	—	—	2	—	—	7	3	3	—	15	7	8	.194
Hypertension with Heart Disease	—	—	—	—	—	—	—	—	2	1	4	1	—	8	1	7	.104
Hypertension Without Heart Disease	—	—	—	—	—	—	—	1	1	2	1	4	—	9	8	1	.117
Other Circulatory Disease	—	—	—	—	—	—	—	1	—	3	3	5	1	13	4	9	.168
Carry forward	1	2	4	1	1	5	13	25	56	124	108	150	37	622	316	315	

CAUSES OF DEATH	AGE													ALL AGES			Death-rate per 1,000 of population
	Under 4 wks.	4 wks. -11 mths.	1-	5-	10-	15-	25-	35-	45-	55-	65-	75-	85 and over	Both Sexes	Males	Females	
Brought forward	1	2	4	1	1	5	13	26	56	124	198	156	37	622	316	315	
Influenza	—	1	1	—	—	1	1	1	—	2	—	3	—	10	4	6	.13
Pneumonia (except of Newborn)	—	9	—	—	—	—	—	1	—	3	4	7	2	26	11	15	.337
Bronchitis	—	2	—	—	—	1	—	—	1	7	16	13	1	41	26	15	.532
Other Respiratory Diseases	—	3	—	—	—	1	—	—	1	1	2	3	1	12	8	4	.156
Ulcer of Stomach and duodenum	—	1	—	—	—	—	—	—	1	5	1	1	—	9	8	1	.117
Appendicitis	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	1	.013
Intestinal Obstruction and Hernia	—	—	—	—	—	1	—	—	2	1	—	1	—	5	2	3	.065
Gastric and Duodenitis	—	—	—	—	—	—	—	—	—	—	1	1	—	2	2	—	.026
Diarrhoea (Except of Newborn)	—	4	—	—	—	—	—	—	—	—	2	1	—	7	6	1	.091
Cirrhosis of Liver	—	—	—	—	—	—	—	—	1	1	—	1	—	3	3	—	.039
Other Diseases of Liver	—	—	—	—	—	—	—	—	1	—	2	—	—	3	—	3	.039
Other Digestive Diseases	—	—	1	—	—	—	—	—	1	—	1	1	—	4	2	2	.052
Nephritis and Nephrosis	—	—	—	—	1	—	—	1	—	1	3	—	—	6	3	3	.078
Hyperplasia of Prostate	—	—	—	—	—	—	—	—	—	1	5	1	—	7	7	—	.091
Other Diseases of Genito-Urinary System	—	—	—	—	—	—	—	—	—	1	1	4	1	7	4	3	.091
Puerperal Sepsis including Post Abortive Sepsis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Puerperal Causes	—	—	—	—	—	—	1	—	—	—	—	—	—	1	—	1	.013
Diseases of Skin and Organs of Locomotion	—	—	—	—	—	—	—	—	—	2	—	2	—	4	2	2	.052
Congenital Malformations	4	3	—	—	—	—	—	—	1	1	—	—	—	9	6	3	.117
Birth Injuries, Post Natal Asphyxia and Atelectasis	6	—	—	—	—	—	—	—	—	—	—	—	—	6	4	2	.078
Pneumonia of Newborn	2	—	—	—	—	—	—	—	—	—	—	—	—	2	—	2	.026
Diarrhoea of Newborn	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Infections of Newborn	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Diseases Peculiar to Early Infancy	7	2	—	—	—	—	—	—	—	—	—	—	—	9	3	6	.117
Senility	—	—	—	—	—	—	—	—	—	—	1	12	8	21	11	10	.273
Causes, Ill-Defined and Unknown	—	5	—	—	—	1	1	—	5	6	9	7	1	35	13	22	.454
Suicide	—	—	—	—	—	—	—	—	1	1	1	1	—	4	3	1	.052
Motor Vehicle Accidents	—	—	2	1	1	1	—	—	3	—	—	—	—	8	5	3	.104
Other Road Transport Accidents	—	—	—	—	—	—	1	—	—	—	—	—	—	1	1	—	.013
Other Violence	—	—	1	—	—	—	3	1	6	3	4	6	4	28	22	6	.363
All Causes	19	33	9	2	3	11	19	30	81	160	249	222	55	893	462	431	

TABLE III.—CAUSES OF DEATH (Public Health Districts)—MEDICAL OFFICER OF HEALTH, 1952

CAUSES OF DEATH	A			B			C			D		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Tuberculosis of Respiratory System	8	2	10	4	2	6	4	4	8	4	2	6
Tuberculosis—Other Forms	—	1	1	1	2	3	—	—	—	—	—	—
Syphilis and its Sequelae	—	—	—	—	—	—	1	—	1	—	—	—
Typhoid Fever (including Paratyphoid)	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery—All Forms	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever and Streptococcal Sore Throat	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	—	—	—	—	—	—	—	—	—	—	1	1
Meningococcal Infections	—	—	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—
Measles	—	1	1	—	—	—	—	—	—	—	—	—
Other Infectious and Parasitic Diseases	—	—	—	—	—	—	—	—	—	—	—	—
Malignant Neoplasms	12	10	22	19	16	35	13	20	33	19	24	43
Benign and Unspecified Neoplasms	—	—	—	1	1	2	—	—	—	—	—	—
Diabetes Mellitus	—	1	1	1	4	5	—	1	1	1	2	3
Anaemias	1	1	2	1	1	2	—	1	1	—	3	3
Other General Diseases	—	1	1	—	—	—	—	2	2	1	3	4
Vascular Lesions of Central Nervous System	8	11	19	20	20	40	7	7	14	19	24	43
Non-Meningococcal Meningitis	—	—	—	—	—	—	—	—	—	—	—	—
Other Diseases of Nervous System	1	—	1	—	3	3	1	1	2	3	2	5
Rheumatic Fever	—	—	—	—	—	—	—	—	—	—	—	—
Chronic Rheumatic Heart Disease	0	1	1	—	5	5	1	—	1	—	1	1
Arteriosclerosis and Degenerative Heart Disease	5	1	6	9	7	16	7	2	9	12	6	18
Other Diseases of Heart	10	13	23	29	27	56	23	30	53	49	34	83
Hypertension with Heart Disease	1	—	1	1	—	1	4	6	10	4	3	7
Hypertension without Heart Disease	—	—	—	—	1	1	—	—	—	—	—	—
Other Circulatory Diseases	—	2	2	2	2	4	1	1	2	1	2	3
Carry forward	46	45	91	88	91	179	62	75	137	113	107	220

CAUSES OF DEATH	A			B			C			D		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Brought forward	46	45	91	88	91	179	62	75	137	113	107	220
Influenza	1	1	2	3	4	7	2	—	2	—	—	—
Pneumonia	4	5	9	6	4	10	1	7	8	3	4	7
Bronchitis	4	2	6	8	4	12	3	2	5	3	2	5
Other Respiratory Diseases	3	1	4	2	3	5	—	2	2	2	5	7
Ulcer of Stomach and Duodenum	1	1	2	2	—	2	1	—	1	4	—	4
Appendicitis	—	—	—	—	—	—	—	—	—	—	1	1
Intestinal Obstruction and Hernia	—	1	1	1	—	1	1	1	2	1	—	1
Gastritis and Duodenitis	—	—	—	1	—	1	—	—	—	1	—	1
Diarrhoea (except of New-Born)	—	—	—	—	—	—	—	—	—	—	—	—
Cirrhosis of Liver	1	—	1	1	—	1	1	—	1	—	—	—
Other Diseases of Liver	—	—	—	1	—	1	—	—	—	—	—	—
Other Digestive Diseases	—	—	—	1	2	3	1	1	2	—	1	1
Nephritis and Nephrosis	—	2	2	1	1	2	2	1	3	2	1	3
Hyperplasia of Prostate	1	—	1	3	—	3	2	—	2	—	—	—
Other Diseases of Genito-Urinary System	2	—	2	3	1	4	2	2	4	3	—	3
Puerperal Sepsis (including Post-Abortive)	—	—	—	—	—	—	—	—	—	—	—	—
Other Puerperal Causes	—	—	—	—	—	—	—	—	—	—	—	—
Diseases of Skin and Organs of Locomotion	—	—	—	—	—	—	—	—	—	—	—	—
Congenital Malformations	3	1	4	1	1	2	—	—	—	—	—	—
Birth Injuries, Asphyxia, Atelectasis	2	1	3	3	—	3	—	—	—	—	1	1
Pneumonia of Newborn	—	2	2	—	—	—	—	1	1	—	—	—
Diarrhoea of Newborn	—	—	—	—	—	—	—	—	—	—	—	—
Other Infections of the Newborn	—	—	—	—	—	—	—	—	—	—	—	—
Other Diseases peculiar to early Infancy	3	3	6	1	1	2	3	4	7	—	—	—
Senility	—	—	—	7	6	13	1	1	2	3	8	11
Causes Ill-Defined or Unknown	2	1	3	3	8	11	2	—	2	4	2	6
Suicide	—	—	—	—	—	—	—	—	—	—	—	—
Motor Vehicle Accidents	—	—	—	—	—	—	—	—	—	—	—	—
Other Road Transport Accidents	—	—	—	—	—	—	1	—	1	—	1	1
Other Violence	6	5	11	12	1	13	5	1	6	6	2	8
All Causes	79	71	150	148	127	275	90	98	188	145	135	280

TABLE IV.—POPULATION AND PRINCIPAL RATES PER 1,000—REGISTRAR GENERAL—1881-1952

Year	Population	Death-rate	Birth-rate	Infantile Mortality Rate	Tuberculosis Death-rate	
					Respiratory	Non-Respiratory
1881-1890	**71,826**	**20.55**	**35.09**	**133**	**2.19**	**0.83**
1891-1895	**62,732**	**21.09**	**33.47**	**139**	**1.82**	**0.63**
1896-1900	**63,894**	**20.04**	**32.96**	**137**	**1.83**	**0.74**
1901-1905	**69,254**	**18.93**	**30.34**	**127**	**1.49**	**0.92**
1906	70,758	17.89	32.21	127	1.34	1.25
1907	71,269	17.79	30.25	104	1.54	1.08
1908	71,783	17.00	30.31	118	1.21	1.12
1909	73,214	15.01	26.73	95	1.09	1.09
1910	74,667	18.87	28.85	129	1.16	0.96
1906-1910	**72,338**	**17.31**	**29.67**	**114**	**1.26**	**1.10**
1911	75,028	18.44	30.73	113	1.50	0.95
1912	76,337	18.70	31.30	119	1.44	1.02
1913	77,156	18.22	31.03	116	1.47	0.86
1914	77,642	18.04	32.84	108	1.00	0.91
1915	77,695	20.14	29.49	145	1.15	0.91
1911-1915	**76,771**	**18.70**	**31.07**	**120**	**1.39**	**0.93**
1916	78,642	17.10	29.20	109	1.42	0.75
1917	79,299	15.10	26.88	92	1.28	0.83
1918	79,574	17.88	26.52	110	1.10	0.82
1919	79,613	17.25	28.73	99	0.94	0.59
1920	80,436	16.51	33.34	104	1.06	0.69
1916-1920	**79,512**	**16.76**	**28.93**	**102**	**1.16**	**0.73**
1921	81,120	14.59	30.15	93	1.01	0.54
1922	81,370	19.17	26.78	149	1.03	0.68
1923	81,522	12.94	27.04	77	0.99	0.54
1924	82,096	15.22	24.16	113	1.00	0.44
1925	81,200	14.32	24.54	107	0.85	0.52
1921-1925	**81,461**	**15.24**	**26.71**	**107**	**0.97**	**0.54**
1926	81,558	13.74	23.87	90	0.98	0.34
1927	80,889	13.26	22.17	89	0.87	0.44
1928	79,204	15.74	24.05	120	0.80	0.34
1929	81,844	15.57	22.22	111	1.04	0.26
1930	79,223	14.20	23.83	96	0.88	0.30
1926-1930	**80,543**	**14.50**	**25.22**	**101**	**0.91**	**0.33**
1931	79,012	13.50	23.40	78	0.90	0.30
1932	79,387	14.63	21.47	121	0.66	0.36
1933	79,486	15.03	20.60	108	0.88	0.18
1934	79,605	12.90	20.86	89	0.79	0.21
1935	79,980	13.85	21.16	92	0.76	0.09
1931-1935	**79,494**	**13.98**	**21.49**	**97**	**0.79**	**0.22**
1936	80,524	13.73	20.29	101	0.63	0.28
1937	80,957	15.60	21.60	97	1.01	0.31
1938	81,297	12.81	20.24	75	0.79	0.30
1939	81,366	13.43	20.30	88	0.93	0.17
1940	79,629	15.27	19.7	82	0.92	0.30
1936-1940	**80,754**	**14.16**	**20.42**	**88**	**0.85**	**0.27**
1941	77,000	14.84	18.8	90	1.17	0.31
1942	74,300	13.95	20.1	104	1.15	0.33
1943	73,205	14.22	21.0	80	0.75	0.21
1944	73,378	13.50	20.5	81	0.94	0.46
1945	73,288	13.29	18.6	74	0.98	0.29
1941-1945	**74,234**	**13.96**	**19.8**	**85**	**0.99**	**0.32**
1946	75,231	12.9	20.7	62	0.96	0.14
1947	79,377	12.8	23.8	64	1.11	0.30
1948	79,470	11.7	21.2	61	1.23	0.19
1949	79,096	12.7	20.9	52	1.13	0.12
1950	80,291	11.8	20.1	48	0.67	0.16
1946-1950	**78,693**	**12.4**	**21.3**	**57**	**1.02**	**0.18**
1951	76,625	12.5	20.4	36	0.63	0.11
1952	77,048	11.6	18.6	36	0.36	0.07

TABLE V.—SOURCES OF NOTIFICATION OF INFECTIOUS DISEASES, 1952

DISEASE	By Whom Reported							TOTAL
	House-holders	House-holders and Doctors	Doctors	Public Health Officers	School Authorities	Registrar	Midwives or Health Visitors	
Chickenpox	359	—	—	—	4	—	—	363
Diphtheria	—	—	1	—	—	—	—	1
Dysentery	—	—	34	—	—	—	—	34
Erysipelas	—	—	10	—	—	—	—	10
Jaundice, Acute Infective	—	—	4	—	—	—	—	4
Malaria	—	—	1	—	—	—	—	1
Measles	537	—	12	—	8	—	3	560
Ophthalmia Neonatorum	—	—	—	—	—	—	5	5
Pneumonia, Notifiable	—	—	43	—	—	6	—	49
Poliomyelitis, Acute	—	—	5	—	—	—	—	5
Puerperal Fever	—	—	2	—	—	—	—	2
Puerperal Pyrexia	—	—	12	—	—	—	—	12
Scarlet Fever	—	—	95	—	—	—	—	95
Typhoid Fever	—	—	1	—	—	—	—	1
Whooping Cough	211	64	141	—	1	—	—	417
Mumps	30	—	3	—	1	—	—	34
Total	1,137	64	364	—	14	6	8	1,593

TABLE VI.—MONTHLY INCIDENCE OF INFECTIOUS DISEASES, 1952

MONTH	Chickenpox	Diphtheria	Dysentery	Erysipelas	Jaundice, Acute Infective	Malaria	Measles	Ophthalmia Neonatorum	Pneumonia, Acute Influenzal	Pneumonia, Acute Primary	Poliomyelitis Acute	Puerperal Fever	Puerperal Pyrexia	Scarlet Fever	Typhoid Fever	Whooping Cough	Mumps	TOTAL
January	27	—	1	1	—	—	22	—	—	3	—	—	1	7	—	38	3	103
February	56	—	—	1	—	—	82	—	—	7	—	—	—	5	—	91	2	244
March	80	—	2	1	—	—	112	1	2	—	—	—	1	12	—	97	—	308
April	30	—	2	1	—	—	60	—	3	8	—	1	1	5	—	64	—	175
May	29	1	1	—	—	—	62	1	1	5	—	—	—	3	1	44	4	152
June	19	—	4	—	—	—	23	—	—	1	—	—	1	4	—	18	2	72
July	6	—	4	1	—	—	7	—	—	2	1	—	1	3	—	6	—	31
August	6	—	1	—	2	1	13	—	—	2	3	—	—	9	—	9	1	47
September	8	—	6	1	1	—	28	—	—	—	1	—	1	13	—	6	5	70
October	8	—	1	2	—	—	34	—	—	5	—	1	3	9	—	14	7	84
November	23	—	10	1	—	—	43	—	—	5	—	—	3	15	—	14	5	119
December	71	—	2	1	1	—	74	3	—	5	—	—	—	10	—	16	5	188
Total	363	1	34	10	4	1	560	5	6	43	5	2	12	95	1	417	34	1,593

TABLE VII.—DISTRICT INCIDENCE OF INFECTIOUS DISEASES WITH NUMBER REMOVED TO HOSPITAL, 1952

Cases		Chickenpox	Diphtheria	Dysentery	Erysipelas	Jaundice, Acute Infective	Malaria	Measles	Ophthalmia Neonatorum	Pneumonia, Notifiable	Poliomyelitis, Acute	Puerperal Fever	Puerperal Pyrexia	Scarlet Fever	Typhoid Fever	Whooping Cough	Mumps	Total
A	Ascertained	206	—	20	—	3	—	51	4	16	1	2	4	22	—	88	11	
	Removed	—	—	17	—	2	—	1	—	7	1	2	2	22	—	4	1	
B	Ascertained	77	—	5	5	—	1	172	—	16	4	—	1	27	—	74	10	
	Removed	—	—	5	1	—	1	3	—	4	3	—	—	26	—	—	—	
C	Ascertained	43	—	4	2	—	—	142	1	8	—	—	4	22	1	94	4	
	Removed	—	—	4	1	—	—	5	—	1	—	—	—	22	1	1	—	
D	Ascertained	37	1	5	3	1	—	195	—	9	—	—	3	24	—	161	7	
	Removed	—	1	5	2	1	—	3	—	5	—	—	—	24	—	2	—	
SHIPS	Ascertained	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	
	Removed	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	
TOTAL	Ascertained	363	1	34	10	4	1	560	5	49	5	2	12	95	1	417	34	1,593
	Removed	—	1	31	4	3	1	12	—	17	4	2	2	94	1	7	3	182

TABLE VIII.

The following cases from the Burgh were removed to Gateside hospital during the year:—

Disease	Remaining 31/12/51	Admitted	Discharged	Died	Remaining 31/12/52
Anaemia	—	6	6	—	—
Bacterial Endocarditis	—	1	—	1	—
Bronchitis & other Respiratory Infections	—	40	39	1	—
Coronary Thrombosis	—	1	—	1	—
Congenital Heart Disease	—	2	1	—	1
Croup	—	1	1	—	—
Convulsions	—	3	3	—	—
Carcimona	—	9	7	1	1
Chorea	—	1	1	—	—
Congestive Cardiac Failure	1	2	2	—	1
Dysentery	—	15	9	—	6
Diphtheria	1	1	2	—	—
Dyspepsia	—	1	1	—	—
Dermatitis	—	3	2	—	1
Encaphalitis	—	1	—	1	—
Enteric Fever	1	1	2	—	—
Erysipelas	1	4	5	—	—
Food Poisoning (Unspecified)	—	3	3	—	—
Fibrocystic Disease of Pancreas	—	1	1	—	—
Gastro-Enteritis	9	38	46	—	1
Gonorrhoea	—	1	1	—	—
Hepatic Neoplasm	—	1	1	—	—
Haemoptysis	—	2	1	—	1
Henoch's Purpura	1	—	1	—	—
Haemorrhage Cerebral	—	1	1	—	—
Ileo-Colitis	—	2	2	—	—
Infective Hepatitis	—	3	3	—	—
Laryngo Tracheo-Bronchitis	—	4	2	2	—
Meningococcal Septicaemia	—	1	1	—	—
Mumps	—	3	3	—	—
Malaria	—	1	1	—	—
Measles	1	9	9	—	1
Meningitis	—	7	6	1	—
Marasmus	—	6	3	1	2
Mitral Stenosis	—	2	2	—	—
Otitis Media	—	2	2	—	—
Peritonsillar Abscess	—	1	1	—	—
Peritonitis	—	1	—	1	—
Puerperal Pyrexia	—	2	2	—	—
Puerperal Fever	—	2	2	—	—
Pneumonia	14	132	126	10	10
Pleurisy	—	7	6	—	1
Prematurity	—	1	1	—	—
Pleural Effusion	1	8	8	—	1
Pulmonary Congestion	—	3	3	—	—
Poliomyelitis, Acute Anterior	—	4	4	—	—
Rheumatic Fever	—	5	4	—	1
Ringworm	—	1	1	—	—
Septic Abortion	—	1	1	—	—
Scarlet Fever	15	94	100	—	9
Tuberculosis	33	73	65	9	32
Tonsillitis	—	17	16	—	1
Urticarial Eruption	—	6	6	—	—
Vincent's Angina	—	2	2	—	—
Whooping Cough	2	5	6	1	—
Other Diseases	1	41	37	3	2
Totals	81	585	561	33	72

TABLE IX.—INFECTIOUS DISEASES RATES—1900-1952

Year	Scarlet Fever			Diphtheria			Measles			Whooping Cough		
	Incidence rate per 1,000	Death-rate per 1,000	Case mortality rate per cent	Incidence rate per 1,000	Death-rate per 1,000	Case mortality rate per cent.	Incidence rate per 1,000	Death-rate per 1,000	Case mortality rate per cent.	Incidence rate per 1,000	Death-rate per 1,000	Case mortality rate per cent.
1900	2.55	0.17	6.93	1.19	0.40	34.56	5.48	0.13	2.41	9.42	1.09	11.58
1901	7.92	0.42	5.36	8.93	0.17	19.67	0.82	0.35	3.24	1.87	0.36	19.53
1902	7.79	0.85	11.00	1.06	0.43	41.09	26.44	0.49	1.87	1.26	0.13	10.34
1903	2.33	0.11	4.93	0.54	0.12	23.68	0.66	0.02	4.34	6.55	1.02	15.63
1904	1.07	0.07	6.66	1.17	0.27	23.17	30.28	0.83	2.74	3.59	0.32	9.16
1905	2.81	0.32	11.61	0.88	0.21	24.19	31.31	0.82	2.63	5.50	0.76	13.95
1906	1.92	0.08	4.41	0.70	0.12	18.00	4.04	0.12	3.14	2.54	0.28	11.11
1907	2.16	0.05	2.59	0.75	0.14	18.51	19.68	0.46	2.35	3.70	0.68	18.56
1908	0.97	0.01	1.42	0.72	0.16	23.07	14.76	0.58	3.96	3.63	0.47	13.02
1909	2.89	0.04	1.41	1.05	0.13	12.98	1.73	0.02	1.57	4.73	0.65	13.83
1910	5.02	0.14	2.93	1.27	0.18	14.73	38.45	1.21	3.16	3.87	0.45	11.76
1911	5.18	0.18	3.59	1.94	0.09	9.85	4.45	0.17	3.89	5.85	0.42	7.28
1912	10.02	0.49	4.96	1.21	0.13	10.75	19.93	0.66	3.35	4.12	0.36	8.88
1913	5.59	0.24	4.39	1.03	0.18	17.50	19.99	0.41	2.07	9.40	0.63	6.74
1914	2.65	0.05	1.94	1.76	0.12	7.29	11.86	0.33	2.82	4.22	0.33	7.92
1915	1.90	0.11	6.08	1.72	0.16	9.70	14.32	0.65	4.58	9.38	0.73	7.81
1916	3.73	0.76	2.04	1.61	0.19	11.81	17.16	0.95	5.55	0.72	0.05	7.01
1917	2.74	0.06	2.29	1.23	0.12	10.20	10.12	0.20	1.99	11.43	0.80	7.05
1918	1.36	0.01	0.91	0.70	0.03	5.35	10.19	1.25	12.33	4.53	0.33	7.47
1919	3.95	0.06	1.58	1.10	0.03	3.40	15.26	0.32	2.13	2.36	0.16	6.91
1920	1.47	0.04	3.36	1.28	0.07	5.82	5.71	0.24	4.34	6.88	0.27	3.97
1921	1.31	0.01	0.93	1.76	0.07	4.19	3.69	0.00	0.00	0.62	0.00	0.00
1922	1.36	0.01	0.90	1.04	0.08	8.23	36.32	2.17	5.98	18.31	0.98	5.36
1923	4.90	0.07	1.50	1.37	0.07	5.35	6.31	0.14	2.33	0.41	0.02	5.88
1924	2.64	0.06	2.30	1.79	0.06	3.40	23.02	0.59	2.59	15.87	0.54	3.45
1925	1.21	0.01	1.01	2.11	0.09	4.65	1.07	0.00	0.00	6.83	0.39	5.76
1926	3.85	0.00	0.00	3.33	0.13	4.04	24.57	0.46	1.89	0.71	0.01	1.72
1927	3.48	0.06	1.77	3.20	0.03	1.15	7.76	0.02	0.31	5.24	0.09	1.88
1928	0.84	0.01	1.49	2.91	0.17	6.06	29.49	1.02	3.46	8.53	0.51	6.06
1929	2.02	0.00	0.00	2.41	0.07	3.03	0.52	0.02	4.64	6.25	0.46	7.44
1930	3.61	0.08	2.35	1.57	0.06	3.87	25.09	0.34	1.35	6.24	0.18	2.92
1931	3.69	0.07	2.05	1.06	0.03	3.57	1.48	0.00	0.00	3.97	0.11	2.86
1932	10.69	0.12	1.17	1.44	0.05	3.47	38.04	0.90	2.38	3.30	0.06	1.90
1933	14.10	0.11	0.80	2.05	0.10	4.90	3.95	0.00	0.00	11.14	0.55	4.96
1934	5.40	0.05	0.93	2.31	0.18	8.15	21.30	0.15	0.70	1.64	0.06	3.81
1935	1.17	0.02	2.12	1.52	0.07	4.91	13.41	0.03	0.27	13.37	0.32	2.42
1936	0.96	0.01	1.28	1.34	0.02	1.85	11.25	0.04	0.44	1.39	0.01	0.89
1937	2.70	0.01	0.54	0.59	0.02	4.16	24.95	0.13	0.54	13.03	0.38	2.93
1938	6.44	0.07	1.14	1.04	0.03	3.52	1.21	0.02	2.02	1.89	0.02	1.29
1939	2.94	0.82	0.83	1.11	0.03	3.29	0.55	0.00	0.00	7.95	0.11	1.39
1940	1.43	0.00	0.00	1.62	0.05	3.10	28.99	0.07	0.25	11.07	0.18	1.70
1941	1.45	0.01	1.98	1.98	0.06	3.26	5.80	0.02	0.44	4.03	0.03	0.96
1942	2.51	0.01	0.53	2.03	0.03	1.98	12.23	0.00	0.00	1.17	0.53	4.59
1943	1.84	0.00	0.00	1.35	0.02	2.02	5.42	0.01	0.25	7.82	0.09	1.22
1944	0.96	0.00	0.00	1.53	0.00	0.00	27.09	0.06	0.25	5.95	0.10	1.83
1945	1.52	0.00	0.00	1.43	0.01	0.95	2.57	0.02	1.05	3.94	0.05	1.31
1946	1.71	0.00	0.00	0.89	0.03	4.54	12.15	0.01	0.10	6.39	0.01	0.20
1947	1.88	0.00	0.00	0.76	0.01	1.63	14.77	0.00	0.00	6.86	0.05	0.73
1948	4.03	0.01	0.31	0.79	0.00	0.00	6.63	0.01	0.18	0.49	0.00	0.00
1949	4.65	0.00	0.00	0.46	0.01	2.70	14.58	0.00	0.00	2.45	0.00	0.00
1950	2.90	0.00	0.00	0.12	0.00	0.00	1.96	0.01	0.63	8.85	0.01	0.14
1951	1.19	0.00	0.00	0.10	0.00	0.00	14.39	0.00	0.00	2.05	0.00	0.00
1952	1.23	0.00	0.00	0.01	0.00	0.00	7.27	0.01	0.18	5.41	0.01	0.24